

1/10/2024 06:40:35 PST
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(850) 617-6381

Registered Agents Inc

Division of Corporations

Fax: 813-4365206

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : REGISTERED AGENTS INC.
Account Number : 120090000081
Phone : (307)200-2803
Fax Number : (813)436-5206

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
Tamarac News Inc.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: Tamarac News Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address
7154 N University DriveTamarac FL 33321

Mailing address, if different is:

7901 4th St NSTE 300St. Petersburg FL 33702**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Our mission is to provide timely and accurate coverage of local news
and events, as well as to foster a sense of community among our readers. We aim to serve as a trusted source of information forour readers, highlighting the issues that matter most to them and providing a platform for diverse voices and perspectives.Through our reporting, we strive to promote transparency, accountability, and civic engagement, while also celebrating the
many achievements and positive developments happening in our community. Ultimately, our goal is to help strengthen and
connect our community, and to create a more informed, engaged, and vibrant place to live.**ARTICLE IV SHARES**The number of shares of stock is: 1000000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Northwest Registered Agent LLC
 Address: 7901 4th St N STE 300
St. Petersburg FL 33702

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Northwest Registered Agent LLC
 Address: 7901 4th St N
St. Petersburg FL 33702

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/09/2024 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity




 Required Signature/Registered Agent

01/10/2024

 Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



 Required Signature/Incorporator

01/10/2024

 Date

2024 JAN 10 PM 3:43