

PR5000001237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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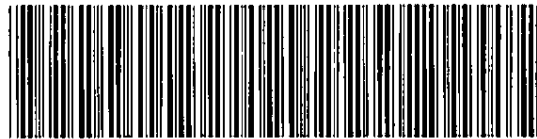
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
DIVISION OF REVENUE
JAN 14 2025
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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: West Palm Beach Air, inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Brian Reischman
Name (Printed or typed)

1601 Belvedere Rd. 300E
Address

West Palm Beach, FL. 33406
City, State & Zip

(561) 559-1790
Daytime Telephone number

BrianReischman@icloud.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JAN 11 2011
TALLAHASSEE, FL 32314

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

ARTICLE I NAME

The name of the corporation shall be: West Palm Beach Air, inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1601 Belvedere Road Suite 300E
West Palm Beach FL 33406 SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any AND ALL lawful Business.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Brian Reischman - President Name and Title: _____

Address: 1601 Belvedere Rd Address: _____
Suite 300E
West Palm Beach FL 33406

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

FILED
SECRETARY OF STATE
JAN 11 2011
TALLAHASSEE, FL

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: Brian Reischman
Address: 1601 Belvedere Road Suite 300E
West Palm Beach FL. 33406

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Brian Reischman
Address: 1601 Belvedere Road Suite 300E
West Palm Beach FL. 33406

ARTICLE VIII EFFECTIVE DATE: 12-1-2024

Effective date, if other than the date of filing: _____ (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

Brian Reischman

Required Signature/Registered Agent

12-1-24

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.

Brian Reischman

Required Signature/Incorporator

12-1-24

Date

SECRETARY OF STATE
DIVISION OF CORPORATIONS
FILED
12-1-24
PM 1:15

Brian Reischman
West Palm Beach Air, inc.
1601 Belvedere Road Suite 300E
(561)-559-1790

November 21, 2024

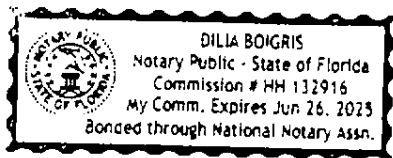
AFIDAVIT

I Brian Reischman as Director, hereby release West Palm Beach Air Inc. document number #P23000078523.

Signed Brian Reischman Brian Reischman

Notary DBogris

Stamp



State of Florida
County of Palm Beach
The foregoing instrument was acknowledged before
me this 13 day of Dec, 20 24, by _____

Brian Joseph Reischman

Notary Public's Signature Notary Name
Personally Known _____ OR
Type of Identification Produced FDX

2024 JAN - 2 09:16:10
FILED
SECRETARY OF STATE
21