# **Electronic Articles of Incorporation For**

N20000000379 FILED January 02, 2020 Sec. Of State dlokeefe

HEALTH RISK SOLUTIONS INC

The undersigned incorporator, for the purpose of forming a Florida not-for-profit corporation, hereby adopts the following Articles of Incorporation:

## **Article I**

The name of the corporation is:
HEALTH RISK SOLUTIONS INC

#### **Article II**

The principal place of business address:

615 29TH ST NW NAPLES, FL. 34120

The mailing address of the corporation is:

615 29TH ST NW NAPLES, FL. 34120

## **Article III**

The specific purpose for which this corporation is organized is:
INSURANCE BROKERAGE SERVICES FOR HEALTH AND LIFE INSURANCE

## **Article IV**

The manner in which directors are elected or appointed is: AS PROVIDED FOR IN THE BYLAWS.

#### Article V

The name and Florida street address of the registered agent is:

JOANN STANGE 615 29TH ST NW NAPLES, FL. 34120

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: JOANN STANGE

### **Article VI**

The name and address of the incorporator is:

JOANN STANGE 615 29TH ST NW

**NAPLES** 

Electronic Signature of Incorporator: JOANN STANGE

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

#### **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P JOANN STANGE 615 29TH ST NW NAPLES, FL. 34120

#### **Article VIII**

The effective date for this corporation shall be:

01/01/2020

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