

PO6000141620

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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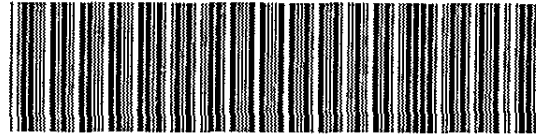
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

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

SUBJECT: ALEXANDER INSURANCE CO.
(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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: ALFONSE ALEXANDER
Name (Printed or typed)

1651 71ST AVENUE
Address

VERO BEACH, FL 32966
City, State & Zip

888 252 6990
Daytime Telephone number

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

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:

ALEXANDER INSURANCE CO.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1656 71ST AVENUE, VERO BEACH, FL 32966

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**SALE OF LIFE INSURANCE, PROPERTY & CASUALTY
INSURANCE AND RELATED PRODUCTS**

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES, \$10.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

**ALFONSE ALEXANDER
PRESIDENT, SECRETARY & DIRECTOR**

ARTICLE VI REGISTERED AGENT

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

**ALFONSE ALEXANDER
1656 71ST AVENUE, VERO BEACH, FL 32966**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**ALFONSE ALEXANDER
1656 71ST AVENUE, VERO BEACH, FL 32966**

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

ALF

Signature/Registered Agent

ALF

Signature/Incorporator

10-31-06

Date

10-31-06

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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