# P0900061000

(Red	questor's Name)			
(Add	dress)	_		
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAtL		
(Business Entity Name)				
	-			
(Doc	cument Number)			
Certified Copies	Certificates	s of Status		
Special Instructions to F	iling Officer:			

Office Use Only



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Effective Date July 14, 2009

07/16/09--01027--008 \*\*87.50

2009 JUL 16 PM 4: 23 SECRETARY OF STATE TALLAHASSEE, FI ORIGA

T. Burch JUL 1 7 2009

# **COVER LETTER**

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

SUBJECT: R	ODRIGUEZ INSURANC				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )		
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:		
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	<ul><li></li></ul>		
		ADDITIONAL COPY REQUIRED			
FROM:	RODRIGUEZ INSURANCE Name	E & INCOME TAX SEF e (Printed or typed)	RVICES INC		
	104 US HWY 17 SOUTH				
_		Address			
WINTER HAVEN, FL 33880					
	City	, State & Zip			
	863	-268-8222			
	Daytime 1	Celephone number			
	RASSOC8@T	AMPABAY.RR.COM			
····	E-mail address: (to be use	d for future annual report	notification)		

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:

# RODRIGUEZ INSURANCE & INCOME TAX SERVICES INC

# ARTICLE II PRINCIPAL OFFICE

Effective Date 51/4 14, 2009

The principal <u>street</u> address and mailing address, if different is: 104 US HWY 17 SOUTH WINTER HAVEN ,FL 33880

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: INSURANCE & INCOME TAX SERVICES

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARTHA RODRIGUEZ / OWNER 303 EAST CITRUS HIGHLANDS DR BARTOW ,FL 33830

#### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: MARTHA RODRIGUEZ 303 EAST CITRUS HIGHLANDS DR

**BARTOW**, FL 33830

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: MARTHA RODRIGUEZ

303 EAST CITRUS HIGHLANDS DR

**BARTOW**, FL 33830

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 accept this familiar with a compact of the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment agent a

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signature/Registered Agent

Signature/Incorporator

Date

**Jate** 

2009 JUL 16 PH 4

Article V111: PLEASE INCORPORATE WITH EFFECTIVE DATE OF JULY 14, 2009.