

TRANSMITTAL LETTER

P97000086086

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

EFFECTIVE DATE
1-2-98

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
91 OCT -6 AM 1:29

SUBJECT: Kim Vole Insurance Agency, Inc.
(Proposed corporate name - must include suffix)

900002263129--C

-08/11/97--01072--011
****131.25 ****131.25

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: KIM VOLE

Name (Printed or typed)

2990 US HWY 301

Address

ELLEN TON, FL. 34222

City, State & Zip

941-722-5711

Daytime Telephone number

AUG 12

BSB

534

607.0123

W97-18544

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

A delayed effective date
may not be later than
90 days after the date
of filing.

10/6



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 12, 1997

KIM VOLE
2990 U.S. HIGHWAY 301
ELLENTON, FL 34222

SUBJECT: KIM VOLE INSURANCE AGENCY, INC.
Ref. Number: W97000018544

We have received your document for KIM VOLE INSURANCE AGENCY, INC. and check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Pursuant to F. S. 607.0123 a delayed effective date may not be later than 90 days after the date of filing.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6925.

Brenda Baker
Corporate Specialist

Letter Number: 497A00040730

**ARTICLES OF INCORPORATION
of
KIM VOLE INSURANCE AGENCY, INC.**

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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The undersigned person(s), acting as incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation:

EFFECTIVE DATE

**ARTICLE I
CORPORATE NAME**

1-2-98

The name of this corporation is KIM VOLE INSURANCE AGENCY, INC..

**ARTICLE II
PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

2990 US Hwy 301 N.
Ellenton, FL 34222

**ARTICLE III
SHARES**

The total number of shares which the corporation shall have authority to issue is 10,000 shares with a par value of \$1.00 per share.

**ARTICLE IV
REGISTERED OFFICE AND AGENT**

The street address of the corporation's initial registered office and the name of its initial registered agent at such address is:

KIM VOLE
2990 US HWY 301
MANATEE COUNTY
ELLENTON, FL 34222

**ARTICLE V
PURPOSE**

The purpose of the corporation is to engage in any lawful activity permitted by the laws of this state.

**ARTICLE VI
DIRECTORS**

The names and residence addresses of the persons constituting the initial board of directors are:

KIM VOLE
5111 OXFORD ROAD
PARRISH, FL 34219

PETER VOLE
5111 OXFORD ROAD
PARRISH, FL 34219

After the initial board of directors, the board shall consist of such number of directors as shall be determined by the shareholders from time to time at each annual meeting at which directors are to be elected.

The directors shall be divided into ONE class(es), the number of directors to be allocated to each class to be as nearly equal as possible and with the term of office in one class expiring each year after the initial annual meeting of shareholders.

ARTICLE VII LIABILITY OF DIRECTORS

To the fullest extent permitted by law, no director of this corporation shall be personally liable to the corporation or its shareholders for monetary damages for breach of any duty owed to the corporation or its shareholders, except that a director may be held personally liable for (i) breaches of the duty of loyalty, (ii) acts or omissions not in good faith or which involve intentional misconduct or a knowing violation of law, (iii) declaration of unlawful dividends or unlawful stock repurchases or redemptions, or (iv) a transaction from which the director derives an improper personal benefit.

Any director or officer who is involved in litigation or other proceeding by reason of his or her position as a director or officer of this corporation shall be indemnified and held harmless by the corporation to the fullest extent permitted by law.

ARTICLE VIII EFFECTIVE DATE OF INCORPORATION

The effective date of incorporation of Kim Vole Insurance Agency, Inc. is to be January 2, 1998.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 2 day of AUGUST, 1997.



Signature



Signature

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENTS IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.


1. The name of the corporation Kim Vole Insurance Agency, Inc.

2. The name and address of the registered agent and office is:

Kim Vole
(Name)
2990 US HWY 301
(P.O. Box or Mail Drop Box NOT Acceptable)
Ellenton, FL 34222
(City/State/Zip)

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Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Signature)

8/2/1997
(Date)