## P010000143792

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
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Office Use Only



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## **COVER LETTER**

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

| Enclosed are an original and one (1) copy of th    | e articles of incorporation and a check for:                             |  |
|--|--|--|
| \$70.00 \$78.75 Filing Fee & Certificate of Status | \$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of |  |
| Please mail 20                                     | Status ADDITIONAL COPY REQUIRED  |  |
| address Below.                                     |  |  |
| FROM: MARY ANN Jalesia.  Name (Printed or typed)   |  |  |
| 10353-Lightner Bridge Or.                          |  |  |
| Tampa Pl. 33626 City, State & Zip                  |  |  |
| 813- 926-3389<br>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: AMORE INSURANCE AGENCY INC.   |
| ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  H033-W. H:115DOROUGH AUE  Tampa Cl. 33614  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  INSURANCE SaleS  |
| ARTICLE IV SHARES The number of shares of stock is:  |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):  MARY ANN Y9/e3ia  10353-Lighther Bridge DR.  Tampa DL 33626  |
| ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  MARY FUNN YORE BRIDGE DR.  TAMPA H 33626  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  MARY ANN YORESIA  10353. Lightner Bridge  Tampa H. 33626 |
| 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    Signature/Registered Agent   Date          |