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SECRETARY OF STATE TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: DEBRA HARR INSURANCE AGENCY, INC.,

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$78.75.

FROM: Debra Harr

2245 N. Courtenay Pkwy.

Unit 6

Merritt Island, Fl. 32953

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ARTICLES OF INCORPORATION

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OF

SECRETARY OF STATE

DEBRA HARR INSURANCE AGENCY, INC. JALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt (s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

DEBRA HARR INSURANCE AGENCY, INC.

ARTICLE II PRINCIPAL OFFICE

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

2245 No. Courtenay Parkway Unit 6 Merritt Island, Fl. 32953

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares of no par value stock.

ARTICLE IV REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Debra Harr 2245 N. Courtenay Pkwy. #6 Merritt Island, Fl. 32953

ARTICLE V INCORPORATOR (S)

The name and street address of the incorporator to these Articles of Incorporation is:

Debra Harr 2245 N. Courtenay Pkwy. #6 Merritt Island, Fl. 32953

The undersigned has executed these Articles of Incorporation this 31 day of 38c___,1998.

DEBRA HARR

FILED

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CERTIFICATE OF DESIGNATION REGISTERED AGENT\REGISTERED OFFICE

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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 statement in designating the registered office\registered agent, in the state of Florida.

1. The name of the corporation is:

DEBRA HARR INSURANCE AGENCY, INC.

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

SIGNARU

DATE

Debra Harr 2245 N. Courtenay Pkwy. #6 Merritt Island, Fl. 32953/

TITLE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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

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