

PO0000012379

TRANSMITTAL LETTER

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

500003116875--5  
-01/31/00--01134--021  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT:

INSURED CHOICE AUTO TAGS, INC.

(Proposed corporate name - must include suffix)

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 of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM:

INSURED CHOICE AUTO TAGS, INC.

Name (Printed or typed)

706 West Boynton Bch Blvd

Address

Boynton Beach, FL 33426

City, State & Zip

305-652-1977

Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FL 32310

00 JAN 31 AM 8:57

FILED

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

2-4  
WC

## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be:

Insured Choice Auto TAGS, INC

### ARTICLE II PRINCIPAL OFFICE

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

706 West Boynton Beach Blvd  
Boynton Beach, FL 33426

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

FL TAX MAN, INC.  
Jeffrey A. Schnelder, MST  
4944 N. University Dr.  
Lauderhill, FL 33351-5748

### ARTICLE V INCORPORATOR

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

FL TAX MAN, INC.  
Jeffrey A. Schnelder, MST  
4944 N. University Dr.  
Lauderhill, FL 33351-5748



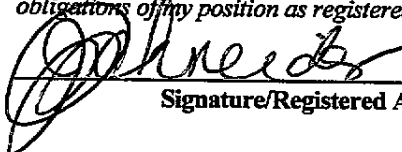
Signature/Incorporator

1/28/00

Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

1/28/00

Date

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00 JAN 31 AM 8:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA