TRANSMITTAL LETTER

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

*****87.50 *****87.50

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

\$70.00

3 \$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

MICHAEL Name (Printed or typed) FROM: JAMES

941-371-2836 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 62 I, F. S. (Profit)

ARTICLE I NAME

The name of the corporation shall

be: Cirillo Insurance &

Financial Services Inc.

ARTICLE II PRINCLPAL OFFICE

The principal place of business/mailing address is: 3658 Webber Street Sarasota, Florida 34232

<u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is: This corporation is organized for the purpose of transacting any or all lawful business for which corporations may be incorporated under Chapter 607 and /or Chapter 621, Florida Statutes (Profit), as now exists or may after be amended.

ARTICLE IV SHARES: This corporation is authorized to issue 1,000 (one thousand) shares of \$1.00 par value common stock which shall be designated as "Common Shares."

ARTICLE V INITIAL OFFICERS/DIRECTORS (OPTIONAL)

The name(s) and address(es): James Michael Cirillo - President

4481 Eleuthera Ct. Sarasota, Florida 34233

Sharon Marie Cirillo – Vice-President

4481 Eleuthera Ct. Sarasota, Florida 34233

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: James Michael Cirillo 4481 Eleuthera Ct. Sarasota, Florida 34233

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: James Michael Cirillo 4481 Eleuthera Ct. Sarasota, Florida 34233

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.

Date

Signature/Registered Agent chad Airilla

ature/Incorporator