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TRANSMITTAL LETTER

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

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-06/27/00--01081--001
*****78.75 *****78.75

SUBJECT: THE DROGOSCH GROUP 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: EARL J. DROGOSCH
Name (Printed or typed)

3490 N KEY DR #515C
Address

N FT MYERS FL 33903
City, State & Zip

941 997-7429
Daytime Telephone number

S. Thompson JUN 29 2000

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

NO COPY

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:

THE DROGOSCH GROUP INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3490 N KEY DR #515C
N FT MYERS FL 33903

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSURANCE ADJUSTING

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

EARL J. DROGOSCH PRES.
3490 N KEY DR #515C
N FT MYERS FL 33903

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

EARL J. DROGOSCH
3490 N KEY DR #515C
N FT MYERS FL 33903

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

EARL J. DROGOSCH
3490 N KEY DR #515C
N FT MYERS FL 33903

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

Signature/Incorporator

Date

FILED
00 JUN 27 PM 1:11
TALLAHASSEE FLORIDA
SECRETARY OF STATE