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TRANSMITTAL LETTER

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

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-06/30/00--01055--015
*****87.50 *****87.50

SUBJECT: Physicians' Financial Corporation
(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: Robert R. Atwood

Name (Printed or typed)

4045 N.W. 43rd Street, Suite B

Address

Gainesville, FL 32606

City, State & Zip

(352) 377-0795

Daytime Telephone number

FILED
00 JUN 30 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

7-5
WC

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:

Physicians' Financial Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4045 N.W. 43rd Street, Suite B
Gainesville, FL 32606

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation is organized for the purposes of engaging in the business of marketing insurance and investments and transacting the business thereof.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

Robert R. Atwood
4045 N.W. 43rd Street, Suite B
Gainesville, FL 32606

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert R. Atwood
4045 N.W. 43rd Street, Suite B
Gainesville, FL 32606


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
Robert R. Atwood

06/28/00

Date



Signature/Incorporator
Robert R. Atwood

06/28/00

Date

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TALLAHASSEE, FLORIDA