

TRANSMITTAL LETTER

P00000096988

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

900003425119--0  
-10/16/00--01016--018  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: East Tampa Auto Insurance Incorporated  
(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:

Liza Richardson

Name (Printed or typed)

3008 E Lindell Avenue

Address

Tampa FL 33610

City, State & Zip

813 - 248 - 8372

Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 OCT 13 PM 2:26

FILED

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

W-24139

10/14 RF



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

October 4, 2000

LIZA RICHARDSON  
3008 E LINDELL AVE  
TAMPA, FL 33610

SUBJECT: EAST TAMPA AUTO INSURANCE INCORPORATED  
Ref. Number: W00000024139

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We have received your document for EAST TAMPA AUTO INSURANCE INCORPORATED. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

Your document will be retained in our pending file.

The corporate filing fees for profit and nonprofit, domestic or foreign are as follows:

Filing Fees	\$35.00
Registered Agent Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

If you have any further questions concerning your document, please call (850) 487-6924.

Kimberly Rolfe  
Corporate Specialist Supervisor

Letter Number: 300A00052704

*Kimberly,  
Thanks for the advice.  
There's one important thing that  
I have learned about giving people.  
There are those who take + there  
are those who give.  
Thanks again for giving.  
Liza  
PS. God Bless!*

# 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:

East Tampa Auto Insurance Incorporated

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3008 E Lindell Avenue  
Tampa FL 33610

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Insurance

## ARTICLE IV SHARES

The number of shares of stock is:

10,000 shares

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Liza Richardson  
3008 E Lindell Avenue  
Tampa FL 33610

## ARTICLE VI REGISTERED AGENT

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

Liza Richardson  
3008 E Lindell Avenue  
Tampa FL 33610

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Liza Richardson  
3008 E Lindell Avenue  
Tampa FL 33610

\*\*\*\*\*

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

Liza Richardson  
Signature/Registered Agent

Oct 2, 2000  
Date

Liza Richardson  
Signature/Incorporator

Oct 2, 2000  
Date

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00 OCT 13 PM 2:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA