TRANSMITTAL LETTER

Polosoo 1801 Department of State

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

SUBJECT:	4. CRUZ & A. (PROPOSED CORPORAT	550Cia+es, Ename- <u>must inclu</u>	DE SUFFIX)	
		_	00003555 -01719701 ******87.50	5 7404 01078021 *****87.50
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for :	ı
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM			 IA: 8:	,
		574n St.	JAN 18 CRETARY LLAHASSE	T T D
		State & Zip	JAN 19 PN 1: 25 ETARY OF STATE HASSEE 1-9RIDA	Ď
	954-757- Daytime	90 76 Telephone number		4. 3

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

John D

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME The name of the corporation shall be: H. Cruz & Associates, Inc.
ARTICLE II PRINCIPAL OFFICE 10693 wiles Rd, Suite 159 The principal place of business/mailing address is: COTAL Springs, F1. 33076
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Insurance Claim Consultants for the Insureds.
ARTICLE IV SHARES The number of shares of stock is: ONE
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Insurance Claim Consultation of the Insureds. ARTICLE IV SHARES The number of shares of stock is: ONE ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es): Hernando A. Cruz- Officer And Direct Hernands of the Stock of the St
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: HERNANDO A. ARUZ 10535 NW 57th 5t. CORAL SPRINGS El. 33076
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: HERNANDO A. CRUZ 10535 NW 57th St. CORAI SPring F1. 33076

genature/Registered Agent

Signature/Incorporator