

# P01000011704

## TRANSMITTAL LETTER

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

700003601287--3  
-01/30/01--01052--007  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: S & A INSURANCE, 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

☐ \$122.50  
Filing Fee  
& Certified Copy

☒ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: SALEEM GHANCHI  
Name (Printed or typed)

6047 Kimberly Blvd suite D  
Address

NORTH NAUDERDALE, FL 33068  
City, State & Zip

(954) 935-9351  
Daytime Telephone number

FILED  
01 JAN 30 PM 4:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

T. Burch

JAN 31 2001

**ARTICLES OF INCORPORATION**

FILED

01 JAN 30 PM 4:12

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

*S & A INSURANCE, INC.*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

*6047 Kimberly Blvd suite D  
N. Lauderdale, FL 33068*

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

*Saleem GHANCHI  
6047 Kimberly Blvd  
N. Lauderdale, FL 33068*

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

SALEEM GHANCHI (pres)

6047 Kimberly Blvd Suite D  
NORTH NAUDERDALE, FL 33068

Phone:-(954) 935-9351 BUS  
(954) 673-5965 Home

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

26 th day of JAN . 2001.

(An additional article must be added if an effective date is requested.)

 (pres)  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE:** Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: SEA INSURANCE, INC.

2. The name and address of the registered agent and office is:

SALEEM GHANCHI  
(NAME)

6047 Kimberly Blvd suit  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

N. Land. FL 33068  
(CITY/STATE/ZIP)

FILED  
01 JAN 30 PM 4:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

*Saleem Ghanchi*  
(SIGNATURE)

1/26/2001  
(DATE)