

TRANSMITTAL LETTER

PD10000021768

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

SUBJECT: ADVANTAGE Insurance Consultants Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

100003767711--8
-02/26/01--01095--012
*****78.75 *****78.75

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: JEFFREY Lee Ludy
Name (Printed or typed)

8950 Brooker drive
Address

New Port Richey, FL 34655
City, State & Zip

(727) 372-3189
Daytime Telephone number

FILED
01 FEB 26 AM 9:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

Advantage Insurance Consultants, Inc.

The name of the corporation shall be:

8950 Brooker Drive, New Port Richey, FL 34655

The principal place of business/mailling address is:

All Lines Insurance Agency

The purpose for which the corporation is organized is:

500

The number of shares of stock is:

The name(s) and address(es):

Jeffrey Ludy 8950 Brooker Drive, New Port Richey, FL 34655

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

William Michael Freeman, 5500 Redhawk Dr. New Port Richey, FL 34655

The name and address of the Incorporator is:

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

Jeffrey Ludy
Signature/Registered Agent

2-23-01
Date

William Michael Freeman
Signature/Incorporator

2/23/2001
Date

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TALLAHASSEE, FLORIDA