

TRANSMITTAL LETTER

P010000061049

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

SUBJECT:

Commercial Insurance Advocates Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

700004425897--1

-06/19/01--01005--005

*****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:

Alexis Michelle Estvez

Name (Printed or typed)

5421 Kingswood Dr.

Address

Orlando, FL 32810

City, State & Zip

407-295-2944

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUN 18 PM 3:18

FILED

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

6/19

ARTICLES OF INCORPORATION

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

ARTICLE I: The name of the corporation shall be COMMERCIAL INSURANCE ADVOCATES INC.

ARTICLE II: The principal place of business and mailing address shall be 5421 Kingswood Drive, Orlando, FL 32810

ARTICLE III: The purpose for which this corporation is organized is to provide consulting services to others regarding their commercial insurance needs, and to sell commercial lines of insurance.

ARTICLE IV: The number of shares of stock is 500.

ARTICLE V: The officer(s) are as follows:

Alexis Michelle Estevez . President
5421 Kingswood Drive
Orlando, FL 32810

ARTICLE VI: The registered agent is as follows:

Alexis Michelle Estevez
5421 Kingswood Drive
Orlando, FL 32810

Signature

Alexis Estevez

ARTICLE VII: The Incorporator is as follows:

Sheri L. Estevez
5421 Kingswood Drive
Orlando, FL 32810

Signature

Sheri L. Estevez

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

X *Alexis Estevez*
Signature/Registered Agent

Sheri L. Estevez
Signature/Incorporator

X *6/9/01*
Date

6/4/01
Date