

# PO1000094961

## Florida Department of State

Division of Corporations

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**To:**

Division of Corporations  
Fax Number : (850) 205-0381

**From:**

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

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## FLORIDA PROFIT CORPORATION OR P.A.

### CITRUS FINANCIAL SERVICES GROUP, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

**ARTICLES OF INCORPORATION  
OF  
CITRUS FINANCIAL SERVICES GROUP, INC.**

**Article I - NAME**

The name of the corporation is **CITRUS FINANCIAL SERVICES GROUP, INC.**

**Article II - DURATION**

This corporation shall exist perpetually unless dissolved according to Florida law.

**Article III - INITIAL REGISTERED OFFICE & AGENT**

The principle office, if known, or the mailing address of the corporation is:

**CITRUS FINANCIAL SERVICES GROUP, INC.  
P.O. BOX 1899  
CRYSTAL RIVER, FL 34423**

The name and street address of the Initial Registered Agent of this Corporation is:

**Michael Germino  
921 East Klosterman Rd  
Tarpon Springs, FL 34689**

**Article IV - PURPOSE**

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the applicable laws of the State of Florida, the United States, or any other county, state, territory or nation.

**Article V - CAPITAL STOCK**

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is **FIVE HUNDRED SHARES (500)** of common stock having **\$1.00 PAR VALUE**.

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**Article VI – LIMITATION OF LIABILITY**

Each director, stockholder and officer, in consideration for his services, shall, in the absence of fraud, be indemnified, whether then in office or not, for reasonable cost and expenses incurred by him in connection with the defense of, or for advice concerning any claim asserted or proceeding brought against him by reason of his being or having been a director, stockholder or officer of the corporation, whether or not wholly owned, to the maximum extent permitted by law. The foregoing right of indemnification shall be inclusive of any other rights to which any director, stockholder or officer may be entitled as a matter of law.

**Article VII – OFFICERS AND DIRECTORS**

This corporation shall have ONE director initially. The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than ONE (1).

The names and addresses of the initial director is:

Gary Salisbury  
President, Vice President, Secretary, Treasurer  
P.O. Box 1899  
Crystal River, FL 34423

**Article VIII – BYLAWS**

The power to adopt, alter, amend or repeal bylaws shall be vested in the Board of Directors and the shareholders.

**Article IX – POWERS**

This corporation shall have all the corporate powers enumerated in the Florida General Corporation Act.

**Article X - AMENDMENT**

This corporation reserves the right to amend or appeal any provisions contained in these articles of incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

**Article XI - INCORPORATOR**

The name and address of the initial incorporator(s) signing these Articles of Incorporation are:

Gary Salisbury  
President, Vice President, Secretary, Treasurer  
P.O. Box 1899  
Crystal River, FL 34423-1899

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation on this 29<sup>th</sup> day of Aug, 2001

INCORPORATOR(S)

By: Gary Salisbury

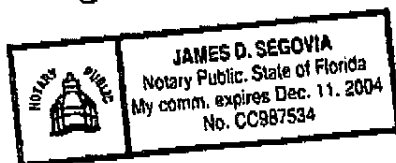
Gary Salisbury

STATE OF FLORIDA  
COUNTY OF CITRUS

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared GARY R SALISBURY identified by a FLORIDA Driver License # S421 296 512 850 executed the foregoing Articles of Incorporation.

IN WITNESS WHEREOF, I hereunto affixed my hand and seal, in the State and County aforesaid, this 29<sup>th</sup> day of Aug, 2001.

Jane D. Segovia



Notary Public for the State of  
My commission expires:

**CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT**

**Certificate of Registered Agent**

**Of**

**Citrus Financial Services GROUP, INC.**

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:  
The above corporation, desiring to organize under the laws of the State of Florida with its  
registered office as indicated in the Articles of Incorporation at:

921 East Klosterman Rd  
Tarpon Springs, FL 34689

Has named **Michael Germino** located at the aforesaid address, as its **Registered Agent** to  
accept service of process within the state.

**ACKNOWLEDGEMENT**

Having been named as Registered Agent to accept service of process for the above stated  
corporation at the place designated in this certificate, and being familiar with the  
obligations of the position, I hereby accept to act in this capacity, and agree to comply  
with the provisions of Florida Law in keeping open said office.

  
Registered Agent

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