TRANSMITTAL LETTER

P01000097039

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

SUBJECT: STETSON INSURANCE SERVICES, INC.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

500004621255--6
-10/03/01--01026--009
*****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: TAMERA O STETSON
Name (Printed or typed)

3457 E. RIVERSIDE DRIVE
Address

FT. MYERS, FL 33916
City, State & Zip

941-337-1888
Daytime Telephone number

FILED
01 OCT -3 AM 9:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

E. Burch OCT 3 2001

ARTICLES OF INCORPORATION

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

01 OCT -3 AM 8:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

STETSON INSURANCE SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3457 E. RIVERSIDE DRIVE
Ft. MYERS, FL 33916

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO CONTRACT INSURANCE POLICIES FOR BUSINESSES AND INDIVIDUALS.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

TAMERA D. STETSON 3457 E. RIVERSIDE DR FT. MYERS FL 33916 PRESIDENT

ROBERT E. STETSON 3457 E. RIVERSIDE DR FT. MYERS, FL 33916 VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

TAMERA O. STETSON 3457 E. RIVERSIDE DR. FT. MYERS, FL 33916

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

TAMERA O. STETSON 3457 E. RIVERSIDE DR. FT. MYERS, FL 33916

****

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

Tamera O Stetson
Signature/Registered Agent

9-28-01
Date

Tamera O Stetson
Signature/Incorporator

9-28-01
Date