10200004126

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



SUBJECT:	Horges of PROPOSEI	CORPORATE NAME	ZNC E-MUST INCLUDES	UFFIX)	
			500	1 004542 -08/20/010	10850
Enclosed is an	original and one(1) copy	of the articles of inco	orporation and a check	*****78.75 k for :	米米米米子

□ \$70.00 Filing Fee Filing Fee & Certificate of Status

S78.75 □ \$87.50
Filing Fee Filing Fee, & Certified Copy & Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Leonard Hodges
Name (Printed or typed)

903 River Heights
Address

TAMPA FL 33603

City, State & Zip

Daytime Telephone number

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

OB 1/14/02



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 23, 2001

LEONARD HODGES 903 RIVER HEIGHTS TAMPA, FL 33603

SUBJECT: HODGES & HODGES, INC.

Ref. Number: W01000019701

We have received your document for HODGES & HODGES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6972.

Doris Brown Document Specialist New Filings Section

Letter Number: 701A00048323

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	na in ED
ARTICLE I NAME	₹ Y& J#N . A
The name of the corporation shall be:	Signal AM 10: n
Hodges & Hodges, Ins. INC	TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	- σημο
The principal place of business/mailing address is:	
903 River Heights MAMPA, FL 33603	
MAMPA, FL 33603	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	los et Senus
INSURANCE HOENT-DA	les of Service
ARTICLE IV SHARES	
The number of shares of stock is:	
100	
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es):	
1 margin Hodees MA	HANA HOBGES
903 River Heights 70	3 River Heights
MAMDA, FL 33603	lampa, FL 33603
President	See/ TREAS.
ARTICLE VI REGISTERED AGENT	•
The name and Florida street address of the registered agent is:	•
Leonard Hodges	
903 Ruck Heights TAMPA FL 33603	
MAMPA FL 33603	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Leonard Hodges 903 River Heights	
963 RIVER HEIGHTS	
TAMPA FL 33603	**********
Having been named as registered agent to accept service of process for the above state certificate, I am familiar with and geoupt the appointment as registered agent and agree.	ed corporation at the place designated in this
1/1/4	
8	1-8-2002 Date 1-8-2002
Signature/Registered Agent	Date
	1 0
(A)	
Signature/Incorporator Y	Date