2%0d TRANSMITTAL LETTER Department of State Division of Corporations P. O. Box 6327 900005080469--0 -03/11/02--01050--004 *****70.00 *****70.00 Tallahassee, FL 32314 SUBJECT: ENTRAL LORIDA NSURANCE 22 (PROPOSED CORPORATE NAME - MUST INC П :21 Hd m Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \bigcirc ပ္သ **S**70.00 **3** \$78.75 \$78.75 **\$**87.50 Filing Fee Filing Fee Filing Fee & Certificate of Status Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: TULIE $\mathbf{\Gamma}$ Name (Printed or typed) 314 WINDSOR ENUE Address ONGWOOD .orida 32750 City, State & Zip 407-834-9631 Daytime Telephone number

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

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ARTICLES OF INC	ORPORATION	<u>د</u>
In computing with Other		

ARTICLES OF INCORPORATION .	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	5.0 0
ARTICLE I NAME The name of the corporation shall be:	SECRETA
CENTRAL FLORIDA Insurance Services, Inc.	HASSEE, FLORI
ARTICLE II PRINCIPAL OFFICE	LO
The principal place of business/mailing address is:	RIC
600 Northean Way # 404 Winter Springs FL 32708	M.
WINTOR Springs IFI 32708	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Insurance Agency	
ARTICLE IV SHARES	
The number of shares of stock is: 1,000 Common Shares (OUE - Housand)	ł
No Par	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s), address(es) and title(s):	
· · · · ·	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	
James K. Caldwell II	
600 Northern Way #404 Winter Springs FL 32708	
Winter Springs FL 32708	
ARTICLE VII INCORPORATOR	

02 MAR 11 PH 12: 53

FILED

The name and address of the Incorporator is:

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Julie D. CAldwar 1314 Windsor Ave LONGWOOD 31750 Fr

** 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

Signat egistered Agent Date 00 Signature/Incorporator Date