

## 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 02 JUN 11 AM 8: 31
SECRETARY OF STATE
TALLATING SEEF FLORIDA

## FLORIDA PROFIT CORPORATION OR P.A.

AMERICAN INSURANCE AGENCY OF HIALEAH, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	1834
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act. hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

AMERICAN INSURANCE AGENCY OF HIALEAH, CORP.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business address of this corporation shall be:

570 HIALEAH DRIVE HIALEAH, FL 33010

The mailing address of this corporation shall be:

570 HIALEAH DRIVE HIALEAH, FL. 33010

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE HUNDRED SHARES ONE DOLLAR PAR VALUE

Prepared by: Pedro M. Ramos, CPA 594 Bast 9 Street #A Hialeah, FL 33010 (305)885-9435

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and address of the initial registered agent is:

DENNIS HERVIS 3921 EAST 3 CT. HIALEAH, FL 33013

ARTICLE V INCORPORATOR (S) See instructions for officers / directors

# The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are): DENNIS HERVIS 3921 EAST 3 CT HIALEAH. FL 33013 The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 10TH day of JUNE 2002. Signature

Signature

Signature

Notarization is not required NOTE: Affixing an officer title after a signature of an

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incorporator does not constitute the designation of offSEGRETANY OF STATE TALLAHASSEE, FLORIDA

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE / REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is:

AMERICAN INSURANCE AGENCY OF HIALEAH , CORP.

2. The name and address of the registered agent and office is:

DENNIS HERVIS

3921 EAST 3 CT

(P.O. Box or Mail Drop NOT acceptable)

HIALEAH, FL 33013

#### (City / State / Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature)

JUNE 10, 2002

(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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