

TRANSMITTAL LETTER

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

SUBJECT: THE J.M. JOHNSON INSURANCE AGENCY, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900008487309--1
-10/21/02--01094--002
*****87.50 *****87.50

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: JOHNNY M. JOHNSON
Name (Printed or typed)

RR 19 BOX 1022
Address

LAKE CITY, FL. 32025
City, State & Zip

(386) 755-1632
Daytime Telephone number

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

02 OCT 21 AM 10:44
SECRETARY OF STATE
DIVISION OF CORPORATIONS

1 24107 OCT 22 2002

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: THE J. M. JOHNSON INSURANCE AGENCY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: P.O. BOX 1591, LAKE CITY, FL. 32056

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A CORPORATION MAY BE ORGANIZED UNDER THE GENERAL CORPORATION LAW OF FLORIDA OTHER THAN THE BANKING BUSINESS, THE TRUST COMPANY BUSINESS OR THE PRACTICE OF A PROFESSION PERMITTED TO BE INCORPORATED BY FLORIDA LAW.

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): JOHNNY M. JOHNSON, RR 19 BOX 1022
LAKE CITY, FL 32025
PRESIDENT

02 OCT 21 AM 10:44
SECRETARY OF STATE
DIVISION OF CORPORATIONS


ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: JOHNNY M. JOHNSON
RR 19 BOX 1022
LAKE CITY, FL. 32025

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: JOHNNY M. JOHNSON
RR 19 BOX 1022
LAKE CITY, FL. 32025

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



Signature/Registered Agent

17 Oct. 2002

Date



Signature/Incorporator

17 Oct. 2002

Date