

PO2000115816

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700008527757

10/25/02--01096--004 **78.75

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
OCT 25 AM 9:22

D. WHITE OCT 29 2002

TRANSMITTAL LETTER

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

SUBJECT: BALLARD INSURANCE AGENCY, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

FROM: MELBA M. BALLARD
Name (Printed or typed)

1855 North Pine Island Road
Address

Plantation, FL 33322
City, State & Zip

(954) 475-3976
Daytime Telephone number

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 OCT 25 AM 9:22

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:

BALLARD INSURANCE AGENCY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1855 North Pine Island Road
Plantation, FL 33322

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES OF PERSONAL/BUSINESS INSURANCE

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES OF COMMON STOCK

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

MELBA M. Ballard Pres
1722 SW 103rd LANE
DAVIE, FL 33324

John E. Ballard VP
1722 SW 103rd Lane
Davie, FL 33324

ARTICLE VI REGISTERED AGENT

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

MELBA M. Ballard
1722 SW 103RD LANE
DAVIE, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MELBA M. BALLARD
1722 SW 103RD LANE
DAVIE, FL 33324

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

Melba M Ballard
Signature/Registered Agent Melba Ballard

10/23/02
Date

Melba M Ballard
Signature/Incorporator Melba Ballard

10/23/02
Date



Lisa J. Von Hoffen
Commission # CC 920371
Expires April 30, 2004
Bonded Thru
Atlantic Bonding Co., Inc.