

P03000010394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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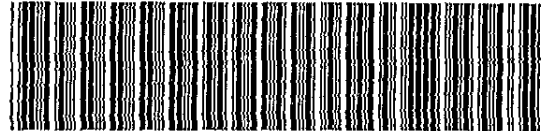
(Business Entity Name)

(Document Number)

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FILED
03 JAN 28 AM 8:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CB 129

TRANSMITTAL LETTER

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

SUBJECT: SAFE CHOICE
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

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

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: SUZANNE M. HURWITZ
Name (Printed or typed)

7686 E SHORE DR
Address

INVERNESS FL 34450
City, State & Zip

352-212-6344
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Ken Detzner
Secretary of State

January 22, 2003

SUZANNE M. HURWITZ
7686 E SHORE DR
INVERNESS, FL 34450

SUBJECT: SAFE CHOICE
Ref. Number: W03000001912

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

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The effective date is not acceptable since it is not within five working days of the date of receipt.

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) 245-6925.

Cynthia Blalock
Document Specialist
New Filing Section

Letter Number: 403A00003581

ARTICLES OF INCORPORATION

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

FILED

03 JAN 28 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

SAFE CHOICE, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7686 E SHORE DR
INVERNESS FL 34450

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES OF INSURANCE PRODUCTS

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):

SUZANNE M. HURWITZ, PRESIDENT
7686 E SHORE DR
Inverness FL 34450

ARTICLE VI REGISTERED AGENT

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

KAREN KRICK
3756 S. SPRING BREEZE WAY
Homosassa, FL 34448

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SUZANNE M. HURWITZ
7686 E SHORE DR
Inverness FL 34450

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

Karen Krick
Signature/Registered Agent

1/10/03
Date

Suzanne M. Hurwitz
Signature/Incorporator

1/10/03
Date