

P030000011726

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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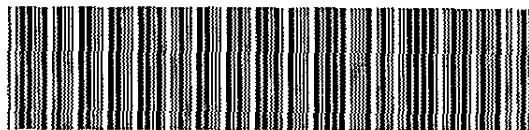
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Total Risk Management Services, Inc.
(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: Eric S. Story & Julia Dunn Story
Name (Printed or typed)

498 Bimini Lane

Address

Indian Harbour Beach, FL 32937

City, State & Zip

321-749-3582

Daytime Telephone number

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

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:

Total Risk Managment Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

498 Bimini Lane
Indian Harbour Beach, FL 32937

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide Risk Management Consulting Services to private and public sector employers.

ARTICLE IV SHARES

The number of shares of stock is:

100 at a par value of \$1.00 each.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Julia Dunn Story, PRESIDENT/TREASURER
498 Bimini Lane
Indian Harbour Beach, FL 32937

Eric S. Story, VICE PRES/SECRETARY
498 Bimini Lane
Indian Harbour Beach, FL 32937

ARTICLE VI REGISTERED AGENT

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

Eric S. Story
498 Bimini Lane
Indian Harbour Beach, FL 32937

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Eric S. Story
498 Bimini Lane
Indian Harbour Beach, FL 32937

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

1/21/03
Date


Signature/Incorporator

1/21/03
Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA