

PO4000086300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

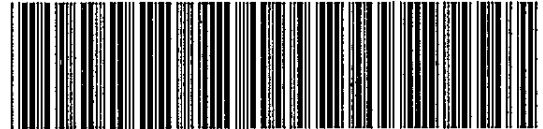
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900037361719

06/01/04--01049--010 **78.75

FILED
04 JUN -1 PM 3:52
FALLS CHURCH, VA

lv
6-2

TRANSMITTAL LETTER

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

SUBJECT: Southeast Insurance Restorations, 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: AIRD
Name (Printed or typed)

1135 N. Northlake Dr.
Address

Hollywood, FL 33028
City, State & Zip

954-914-1068
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:

Southeast Insurance Restoration, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*1135 N. Northlake Dr.
Hollywood, Fl. 33019*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any Business Purpose

ARTICLE IV SHARES

The number of shares of stock is:

50

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

*Heather Thress, P, VP, T, S
1135 N. Northlake Dr.
Hollywood, Fl. 33019*

ARTICLE VI REGISTERED AGENT

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

*Heather Thress
1135 N. Northlake Dr.
Hollywood, Fl. 33019*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Heather Thress
1135 N. Northlake Dr.
Hollywood, Fl. 33019*

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

Heather A. Thress

Signature/Registered Agent

5/26/04

Date

Heather A. Thress

Signature/Incorporator

5/26/04

Date

FILED
04 JUN -1 PM 3:52
TALLAHASSEE, FLORIDA
SECRETARY OF STATE