

PO4000126632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

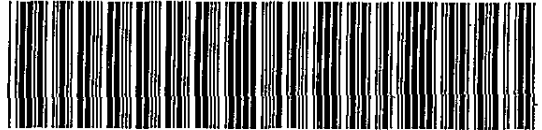
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2170 W. State Rd. 434  
Suite 100  
Longwood, FL 32779  
407-774-1300 X1187  
407-834-9995 Fax

# Empire Financial Group, Inc.

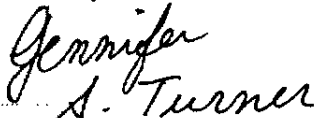
August 31, 2004

Florida Department of State  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

Dear Representative,

Please find enclosed articles of incorporation application for Empire Financial Insurance Agency, Inc. Also, we have enclosed the proper filling fees. Please let me know if you have any questions.

Sincerely,



Jennifer A. Turner  
Licensing/Compliance Department  
Empire Financial Group, Inc.

## 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:

Empire Financial Insurance Agency, Inc.

### ARTICLE II      PRINCIPAL OFFICE

The principal place of business/mailing address is:

2170 W. State Rd. 434, Suite 100, Longwood, FL 32779

### ARTICLE III      PURPOSE

The purpose for which the corporation is organized is:

To Sell Insurance Products in the state of Florida

### ARTICLE IV      SHARES

The number of shares of stock is:

1000 shares

### ARTICLE V      INITIAL OFFICERS AND/OR DIRECTORS

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

Rodger E. Rees-2170 W. State Rd. 434, Suite 100, Longwood, FL 32779-President and Director

Donald Wojnowski-2170 W. State Rd. 434, Suite 100, Longwood, FL 32779-Secretary and Director

### ARTICLE VI      REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

CT Corporation System  
1200 S. Pine Island Road  
Plantation, FL 33324

### ARTICLE VII      INCORPORATOR

The name and address of the Incorporator is:

Rodger E. Rees-2170 W. State Rd. 434, Suite 100, Longwood, FL 32779

\*\*\*\*\*  
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

PETER F. SOUZA  
ASSISTANT SECRETARY

Signature/Registered Agent

Date

Signature/Incorporator

Date

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JACKSONVILLE, FLORIDA

8/31/04