# P04000128507

(Requestor's Name)  (Address)	
(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



500040769935

19/10/04 -01004 -013 \*\*78.75

THE SECTION OF STATES TO THE S

Bm 9/10

### Knowles Insurance Services, Inc.

5046 Eagle Point Drive Jacksonville, FL 32244

September 3, 2004

Florida Secretary of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RE: Incorporation of Knowles Insurance Services, Inc.

Dear Sir or Madam:

Enclosed are the completed Articles of Incorporation of Knowles Insurance Services, Inc. In addition, I have enclosed a check for \$78.75 to cover the various fees.

If there are any questions, please contact me.

Sincerely yours,

Sandra Knowles

Officer

**Enclosures** 

## ARTICLES OF INCORPORATION OF

#### Knowles Insurance Services, Inc.

#### ARTICLE I. NAME

The name of the corporation is:

Knowles Insurance Services, Inc.

Its business shall be conducted in the United States and its possessions and in all foreign countries, wherever necessary or convenient.

#### ARTICLE II. BUSINESS

The general nature of the business or businesses to be transacted, conducted and carried on by this corporation shall be to engage in any activity or business permitted under the laws of Florida.

#### ARTICLE III. CAPITAL STOCK

The authorized capital stock of this corporation shall be 500 shares of common stock, each share having a par value of \$1.00.

#### ARTICLE IV. TERM

The term for which this corporation is formed is and shall be perpetual or until dissolved according to law.

#### ARTICLE V. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation in the State of Florida is:

5046 Eagle Point Drive Jacksonville, FL 32244

SKRIVANGERAL OF STATE OF STATE

The name of the initial registered agent of this corporation at that address is:

Sandra Knowles

The principal office and the mailing address of this corporation is:

5046 Eagle Point Drive Jacksonville, FL 32244

#### ARTICLE VI. INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director initially. The number of directors may be either increased or diminished from time to time by the Bylaws, but shall never be less than one (1). The names and addresses of the initial directors of this corporation are:

**NAME** 

STREET ADDRESS

Sandra Knowles

5046 Eagle Point Drive Jacksonville, FL 32244

#### ARTICLE VII. INCORPORATORS

The name and address of the persons signing these Articles is:

NAME

STREET ADDRESS

Sandra Knowles

5046 Eagle Point Drive Jacksonville, FL 32244 IN WITNESS WHEREOF, the undersigned incorporator has hereunto set their hand and seal of this Friday, September 03, 2004.

Sandra Knowles (SEAL)

STATE OF FLORIDA	)
	: ss
COUNTY OF DUVAL	)

Before me, a notary public authorized to take acknowledgments in the state and county set forth above, personally appeared Sandra Knowles known to me or has produced

as identification and known by me to be the person who executed the foregoing Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid.

Date: September 3, 2004

Notary Public State of Florida

My Commission Expires: Hugust 5, 2008

TERESA C ROMINES
Notary Public - State of Fiorida
My Commission Expires Aug 5, 2008
Commission # DD344062
Bonded By National Notary Asen.

### CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

Pursuant to Chapter 607.034, Florida Statutes, the following is submitted, in compliance with said Act:

#### First-That Knowles Insurance Services, Inc. desiring

to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation at 5046 Eagle Point Drive, City of Jacksonville, County of Duval State of Florida, has named Sandra Knowles located at 5046 Eagle Point Drive, City of Jacksonville, County of Duval, State of Florida, as its agent to accept service of process within this state.

#### ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

Sandra Knowles, Registered Agent

OLSEPIO PM 3: IL