

P04000151229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

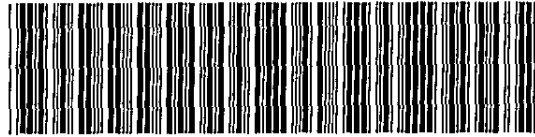
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

11-04-04
B

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

*Terry L. Myers Insurance
Agency, Inc.*

- ☒ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- ☒ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

Signature _____

Requested by: *WC*

Name _____

Date *11/4*

Time *11:00*

Walk-In _____

Will Pick Up _____

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:

Terry L. Myers Insurance Agency, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4985 Holtner Ave. Orlando, FL 32812

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in the transaction of any or all lawful business for which corporations may be incorporated under the laws of the State of Florida including, but not limited to insurance services.

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares Having No Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Terry L. Myers
8504 Waterwillow Place
Orlando, FL 32827
P/S/T/DCharles F. Myers
8504 Waterwillow Place
Orlando, FL 32827
VP/D**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Terry L. Myers
8504 Waterwillow Place
Orlando, FL 32827**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Terry L. Myers
8504 Waterwillow Place
Orlando, FL 32827

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 Agent11/3/04

Date

Signature/Incorporator11/3/04

DateFILED
04 NOV -4 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA