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Division of Corporations Public Access System

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To:

Division of Corporations

: (850)205-0381 Fax Number

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number: I20010000247 : (800)494-3124 Phone Fax Number : (305)675-2811

# FLORIDA PROFIT CORPORATION OR P.A.

A Trinity Insurance Agency, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
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### ARTICLES OF INCORPORATION

A1A#CORPORATE#SERVICES

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

# ARTICLE I NAME

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The name of the corporation shall be:

A TRINITY INSURANCE AGENCY, INC.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1841 S.E. Deming Ave Port St. Lucie, FL 34952

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

## ARTICLE IV SHARES

The number of shares of stock is:

1500 COMMON SHARES

# ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers:

Director President Vice-Preisdent Treasurer

Kristen DiMonda 1841 SE Deming Ave Port St. Lucie, Fi 34952

Director Svívia DiMonda 1841 SE Deming Ave Secretary

Port St. Lucie, Fl 34952

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PAGE 2 A TRINITY INSURANCE AGENCY, INC.

# ARTICLE VI REGISTERED AGENT

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

MARTIN HANNAN P.A. 9370 SUNSET DR. MIMAI, FL 33173

# ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

KRISTEN DIMONDA 1841 SE DEMING AVE PORT ST. LUCIE, FL 34952

Having been named as registered agent to accept service of process for the above 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

Date

Signature / Incorporator

Date

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