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SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 APR 14 PM 3:00

B. McKnight APR 19 2005

TRANSMITTAL LETTER

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

SUBJECT: Quick Claim, 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: Gregory M McCraw

Name (Printed or typed)

2750 Old St Augustine Rd, #P-160

Address

Tallahassee, FL 32301

City, State & Zip

(214) 957-7522

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:

Quick Claim, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2750 Old St Augustine Rd, #P-160, Tallahassee, FL 32301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

All lawfull business within the state of Florida. Primary business is all-lines independent claims adjusting agency.

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Gregory M McCraw--President, 2750 Old St Augustine Rd, #P-160, Tallahassee, FL 32301

Sandra A McCraw--Sr Vice President, 2750 Old St Augustine Rd, #P-160, Tallahassee, FL 32301

Dustin M McCraw--Vice President, 2750 Old St Augustine Rd, #P-160, Tallahassee, FL 32301

Clinton G McCraw--Vice President, 2750 Old St Augustine Rd, #P-160, Tallahassee, FL 32301

ARTICLE VI REGISTERED AGENT

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

Gregory M McCraw

2750 Old St Augustine Rd, #P-160

Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sandra A McCraw

2750 Old St Augustine Rd, #P-160

Tallahassee, FL 32301

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 Agent

4/10/05

Date


Signature/Incorporator

4/10/05

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 APR 14 PM 3:00