

P05000.116712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

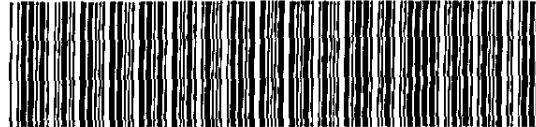
(Business Entity Name)

(Document Number)

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08/22/05--01023--024 **P. 75

DEPT OF STATE
TALLAHASSEE, FLORIDA

SEP 22 PM 3:11

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TRANSMITTAL LETTER

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

SUBJECT: Davenport/Barrett Insurance Agency, 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: David Haugen, CPA
Name (Printed or typed)

450 Wekiva Preserve Drive
Address

Apopka, FL 32712
City, State & Zip

407-889-7647
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:

Davenport/Barrett Insurance Agency, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1155 W. State Road 434, Suite 123
Longwood, FL 32750

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sell Insurance policies and consult on insurance needs and issues for businesses and individuals.

ARTICLE IV SHARES

The number of shares of stock is:

100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Timothy A. Davenport, President
12127 Callista Court
Orlando, FL 32825

Debbie A. Barrett, Vice-President
1034 Covington Street
Oviedo, FL 32765

ARTICLE VI REGISTERED AGENT

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

Timothy A. Davenport
12127 Callista Court
Orlando, FL 32825

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Timothy A. Davenport
12127 Callista Court
Orlando, FL 32825


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

8/18/05

Date



Signature/Incorporator

8/18/05

Date

FILED

05 AUG 22 PM 3:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA