

Pb5000122974

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

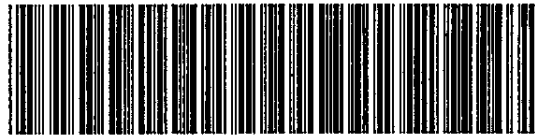
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Victor Zamora GAVE
AUTHORIZATION BY PHONE TO
CORRECT Articles I + VII
DATE 9/8/05
DOC. EXAM MRB

Office Use Only



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09/06/05--11:16--04 **16.0

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 SEP -6 PM 2:44

MRB
9/8

TRANSMITTAL LETTER

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

SUBJECT: 1ST CHOICE INSURANCE OF FLORIDA INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: INALVIS ROGUE
 Name (Printed or typed)

3260 W. HILLSBOROUGH AVE #105
 Address

TAMPA, FL. 33614
 City, State & Zip

813) 434-5896
 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)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I NAME

The name of the corporation shall be:

1ST CHOICE INSURANCE OF FLORIDA INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3260 w. hillsborough ave APT 105
TAMPA, FL. 33614

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE CORPORATION SHALL ENGAGE IN ANY BUSINESS OR ACTIVITY PERMITTED
UNDRE THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

100
one hundred

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

INALVIS ROQUE -PRESIDENT
3260 W. HILLSBOROUGH AVE #105
TAMPA, FL. 33614

VICTOR ZAMORA-VICE-PRES
3260 W HILLSBOROUGH AVE #105
TAMPA, FL. 33614

ARTICLE VI REGISTERED AGENT

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

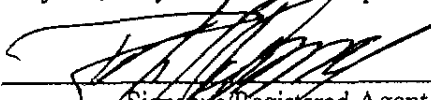
RALPH PEREZ
10921 AIRVIEW DR
TAMPA, FL. 33625

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

INALVIS ROQUE
3260 W HILLSBOROUGH AVE #105
TAMPA, FL. 33614

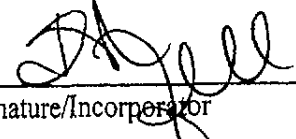
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am famillar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

9/2/2005

Date



Signature/Incorporator

9/2/2005

Date