

P05000153135

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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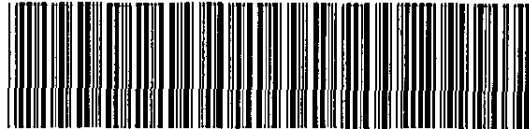
(Business Entity Name)

(Document Number)

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SECRETARY
DIVISION OF
PUBLIC

TRANSMITTAL LETTER

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

SUBJECT: Matt Savage Adjusting, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Matthew Thomas Savage
Name (Printed or typed)
17630 Akins Drive
Address
Spring Hill, Florida 34610
City, State & Zip
(727) 243-5684
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
DIVISION OF CORPORATE REGISTRATION

05 NOV 16 AM 9:24

ARTICLE I NAME

The name of the corporation shall be:

Matt Savage Adjusting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**17630 Akins Drive
Spring Hill, Florida 34610**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Insurance adjusting for catastrophe's

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Matthew Thomas Savage, President

ARTICLE VI REGISTERED AGENT

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

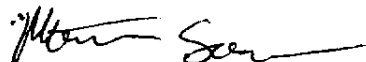
**Matthew Thomas Savage
17630 Akins Drive
Spring Hill, Florida 34610**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**Matthew Thomas Savage
17630 Akins Drive
Spring Hill, Florida 34610**

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

11/7/2005

Date



Signature/Incorporator

11/7/2005

Date