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LAZARUS CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOCUM	ENT NUMBER(S), (if known):
TRI-COUNTY CE	RTIFIED INSURAN
ADJUSTERS (Corporation Name)	(Document #)
(Corporation Name)	(Document #)
(Corporation Name) Walk in Pick up time 2 Mail out Will wait	(Document #) Certified Copy Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

TR9-county Certified Insurance adjusters Coep

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be-

12850 SW 47 ST Miani, FI 33175

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Deyen? Advincula 7711 NW 5. River Dr Medley FI 33161

ARTICLE V - INCORPORATOR
The name and street address of the incorporator to these Articles of Incorporation is: Reynald Alvarez/Dayani Advince Reynald Alvarez/Dayani Advince 12850 5W 47 5+ Thinw 5. River 12850 5W 47 5+ T
Incorporation this 13 day of February 2008. Signature Signature
ARTICLE VI- DIRECTOR (5) The name(s) and street address (es) of the director(s) to these
Articles of incorporation is (are):
Reynaldo Alvarez 12850 SW 475t - President Miami, Fl 33175
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE
Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, i hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am

Registered Agent Signature