

PO6000032183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

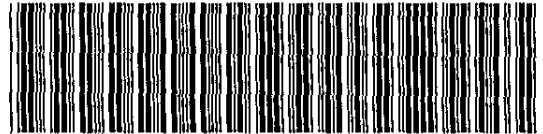
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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C.S. 3-1

COVER LETTER

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

SUBJECT: Insurance Compliance Services, 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: Carol E. Dow
Name (Printed or typed)

7868 Skipper Lane
Address

Tallahassee, FL 32317
City, State & Zip

850.878.6012
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:

Insurance Compliance Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7868 Skipper Lane, Tallahassee, FL 32315

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Conduct examinations of insurance companies

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

William A. Dow, III, President/Vice President

Carol E. Dow, Secretary/Treasurer

ARTICLE VI REGISTERED AGENT

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

William A. Dow, III

7868 Skipper Lane

Tallahassee, FL 32317

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Carol E. Dow

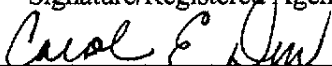
7868 Skipper Lane

Tallahassee, FL 32317

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



Signature/Incorporator CAROL E. DOW

3-6-06

Date

3-6-06

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA