

PO6000033077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

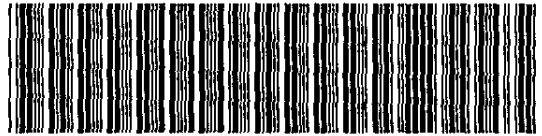
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400066940004

12/06/14--01060--012 **78.75

7:11:00
SECTIONARY MAIL
DIVISION OF TOLSON ACTIONS
06 MAR -6 PM 2:20

B. McKnight MAR 07 2006

COVER LETTER

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

SUBJECT: Academy Insurance & Financial 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: John A. Turner

Name (Printed or typed)

9019 Biscayne Boulevard

Address

Miami Shores, FL 33138

City, State & Zip

305-751-0330

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:

Academy Insurance & Financial Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9019 Biscayne Boulevard
Miami Shores, Florida 33138

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Insurance Agency

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

John A. Turner, President-Treasurer
4020 NW 189th Terrace
Miami Gardens, Florida 33055

Elizabeth W. Turner
4020 NW 189th Terrace
Miami Gardens, Florida 33055

ARTICLE VI REGISTERED AGENT

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

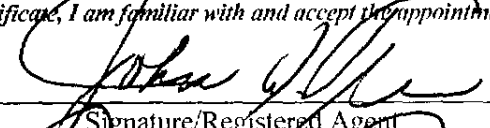
John A. Turner
4020 NW 189th Terrace
Miami Gardens, Florida 33055

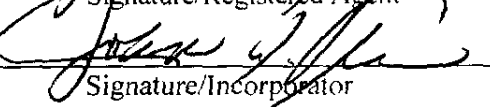
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John A. Turner
4020 NW 189th Terrace
Miami Gardens, Florida 33055

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

3-1-2006
Date
3-1-2006
Date

06 MAR -6 PM 2:20

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS