

P06000057046

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

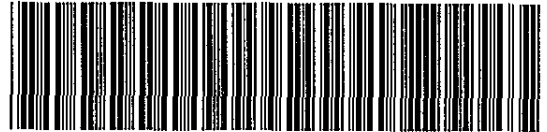
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2006 APR 21 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

t. Burch APR 21 2006

COVER LETTER

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

SUBJECT: Bayside Insurance Agency, PA
(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: Rebecca Inman
Name (Printed or typed)

737 Periwinkle Drive
Address

Sebastian FL 32958
City, State & Zip

772-388-6555
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:

Bayside Insurance Agency, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

737 Periwinkle Drive
Sebastian, Florida 32958

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Insurance Agency (as a Professional Association)

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):

Rebecca Inman, President
737 Periwinkle Drive
Sebastian, FL 32958

ARTICLE VI REGISTERED AGENT

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

Rebecca Inman
737 Periwinkle Drive
Sebastian, FL 32958

ARTICLE VII INCORPORATOR

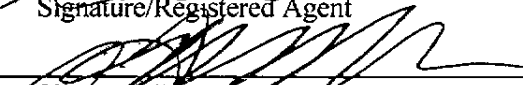
The name and address of the Incorporator is:

Rebecca Inman
737 Periwinkle Drive
Sebastian, FL 32958

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

4/13/06

Date

4/13/06

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA