

PO6000094083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

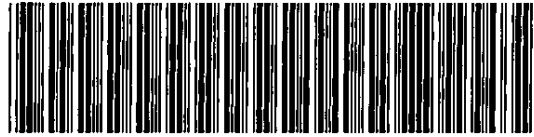
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400077470964

07/17/06--01008--020 **87.50

FILED

2006 JUL 17 A 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7-18-06
WCC

COVER LETTER

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

SUBJECT: Gulfcoast Adjusters, 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: Manuel J. Alvarez
Name (Printed or typed)

109 N. Brush Street, Suite 500
Address

Tampa, Florida 33602
City, State & Zip

(813) 229-7007
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:

Gulfcoast Adjusters, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3408 W. Ivy Street
Tampa, Florida 33607

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is:

1000 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President:	Terence "Tip" Valdez
Vice President:	George Greg Valdez
Vice President:	John Robert Hannon

ARTICLE VI REGISTERED AGENT

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

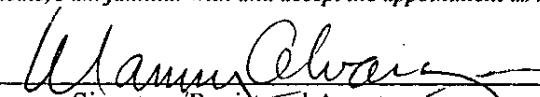
Manuel J. Alvarez
109 N. Brush Street, Suite 500
Tampa, Florida 33602

ARTICLE VII INCORPORATOR

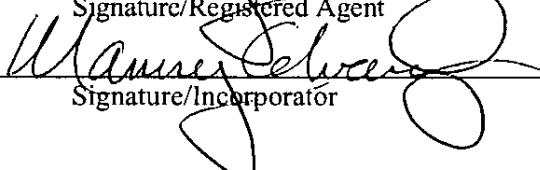
The name and address of the Incorporator is:

Manuel J. Alvarez
109 N. Brush Street, Suite 500
Tampa, Florida 33602

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



Date



Date

FILED

2006 JUL 17 A 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA