

P06000138781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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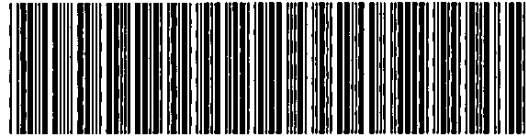
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
06 NOV -2 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: E B G BENEFITS, 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: RICHARD ALLEN FERREIRA

Name (Printed or typed)

2162 ANTILLIES DRIVE

Address

PENSACOLA, FLORIDA 32506

City, State & Zip

850. 454. 9026

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:

E B G BENEFITS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2162 ANTILLIES DRIVE, PENSACOLA, FLORIDA 32506

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

EMPLOYEE BENEFITS GROUP

ARTICLE IV SHARES

The number of shares of stock is:

10,000 COMMON

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

RICHARD ALLEN FERREIRA, PRESIDENT
2162 ANTILLIES DRIVE, PENSACOLA, FLORIDA 32506

ARTICLE VI REGISTERED AGENT

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

RICHARD ALLEN FERREIRA
2162 ANTILLIES DRIVE, PENSACOLA, FLORIDA 32506

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RICHARD ALLEN FERREIRA
2162 ANTILLIES DRIVE, PENSACOLA, FLORIDA 32506

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

X Richard A Ferreira
Signature/Registered Agent

10/30/2006

Date

X Richard A Ferreira
Signature/Incorporator

10/30/2006

Date

FILED
06 NOV -2 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA