

Pa0000142804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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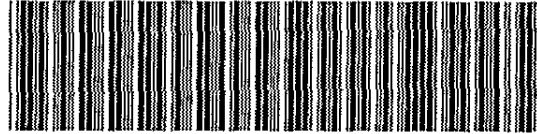
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/18/06--01017--021 **87.50

FILED
OCT 19 10 12 06
10/19/06

Pa

COVER LETTER

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

SUBJECT: Miller Benefits Group, 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: Stephen (aka, Steve) W. Miller
Name (Printed or typed)

3930 Orange Lake Drive
Address

Orlando, Florida 32817
City, State & Zip

407-758-7606
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 18, 2006

STEPHEN W. MILLER
3930 ORANGE LAKE DRIVE
ORLANDO, FL 32817

SUBJECT: MILLER BENEFITS GROUP, INC.
Ref. Number: W06000045769

We have received your document for MILLER BENEFITS GROUP, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call 850-245-6052.

Paisley A Alford
New Filing Section
Division of Corporations

Letter Number: 506A00062075

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:

Miller Benefits Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3930 Orange Lake Drive, Orlando, Florida 32817

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sale and service of group and individual insurance products

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):

Stephen (aka Steve) W. Miller, President, 3930 Orange Lake Drive, Orlando, FL 32817
W. Renee Miller, Vice President, 3930 Orange Lake Drive, Orlando, FL 32817

ARTICLE VI REGISTERED AGENT

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

Stephen W. Miller
3930 Orange Lake Drive
Orlando, Florida 32817

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Stephen W. Miller
3930 Orange Lake Drive
Orlando, Florida 32817

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

11/06/2006

Date



Signature/Incorporator

11/06/2006

Date

FILED
06/03/10 AM 9:34
SEC. OF STATE
TALLAHASSEE, FL 32304