

P07000017626

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2007 FEB -8 PM 3:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

107-5042

T. Hampton FEB 08 2007

## TRANSMITTAL LETTER

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

**SUBJECT:** Johnston and Towns Insurance and Investment Brokers  
(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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** Thomas L. Johnston  
Name (Printed or typed)

1201 Forest Circle  
Address

Altamonte Springs, FL 32714  
City, State & Zip

407-497-1440  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 30, 2007

THOMAS L JOHNSON  
1201 FOREST CIR  
ALTAMONTE SPRINGS, FL 32714

SUBJECT: JOHNSON AND TOWNS INSURANCE AND INVESTMENT  
BROKERS, INC.  
Ref. Number: W07000005042

*Name needs to be corrected*

We have received your document for JOHNSON AND TOWNS INSURANCE AND INVESTMENT BROKERS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

Please return the original and one copy of 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) 245-6855.

Tammy Hampton  
Document Specialist  
New Filing Section

Letter Number: 807A00007261

*2661 Executive Center Cr  
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32301*

RECEIVED  
07 FEB -8 AM 11:19  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

2007 FEB -8 PM 3:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## **ARTICLE I NAME**

The name of the corporation shall be:

Johnston and Towns Insurance and Investment Brokers, Inc.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

445 Douglas Avenue  
Suite 1305  
Altamonte Sprinas. FL 32714

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Sales, service and distribution of insurance products

## **ARTICLE IV SHARES**

The number of shares of stock is:

10,000

## **ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

Thomas L. Johnston - President  
1201 Forest Circle  
Altamonte Springs, FL 32714

Deborah Towns - V. President

9060 Summit Centre Way, Apt. 303  
Orlando FL 32810

## **ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

Thomas L. Johnston  
1201 Forest Circle  
Altamonte Springs, FL 32714

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Thomas L. Johnston  
1201 Forest Circle  
Altamonte Springs, FL 32714

\*\*\*\*\*  
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

Thomas L. Johnston  
Signature/Registered Agent

2-7-2007  
Date

Thomas L. Johnston  
Signature/Incorporator

2-7-2007  
Date