

P070009106152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

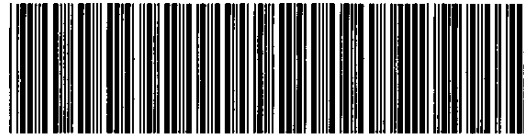
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600109680596

09/24/07--01041--007 \*\*78.75

FILED

07 SEP 24 AM 9:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Re*

COVER LETTER

FEIN  
26-1097807

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

SUBJECT: Community Risk & Insurance Services, 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: Susan H. Barrett Staley  
Name (Printed or typed)

10014 Grove Drive, Suite A  
Address

Port Richey, Florida 34668  
City, State & Zip

727-863-1149  
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:

Community Risk & Insurance Services, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

10014 Grove Drive, Suite A, Port Richey, Florida 34668

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Commercial Risk Management Services & Insurance Sales

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Susan Barrett, President

Melvin R. Staley, Vice President/Secretary-Treasurer

**ARTICLE VI REGISTERED AGENT**

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

Susan H. Barrett, 12605 Clock Tower Parkway, Bayonet Point, Florida 34668

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Susan H. Barrett, 12605 Clock Tower Parkway, Bayonet Point, Florida 34668

FILED  
07 SEP 24 AM 9:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*\*\*

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

Susan Barrett  
Signature/Registered Agent

Susan Barrett  
Signature/Incorporator

9/20/07  
Date

9/20/07  
Date