

P07000109975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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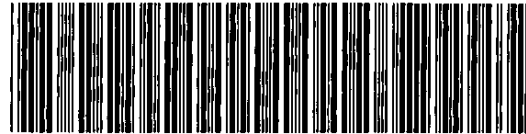
(Business Entity Name)

(Document Number)

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

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2007 OCT -4 PM 1:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2007 OCT 5 2007

COVER LETTER

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

SUBJECT: Brad Cole Insurance Agency, 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: Brad Cole  
Name (Printed or typed)

2 Coquina Cliff Circle  
Address

Ormond Beach, FL 32174  
City, State & Zip

386-682-3151  
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:

Brad Cole Insurance Agency, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1459 N. US Hwy 1, Suite A1  
Ormond Beach, FL 32174

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sell insurance and financial services.

## ARTICLE IV SHARES

The number of shares of stock is:

1,000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Brad Cole, President & CEO  
2 Coquina Cliff Circle  
Ormond Beach, FL 32174

April Cole, Vice-President & Treasurer  
2 Coquina Cliff Circle  
Ormond Beach, FL 32174

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**ARTICLE VI REGISTERED AGENT**

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

Brad Cole  
2 Coquina Cliff Circle  
Ormond Beach, FL 32174

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Brad Cole  
2 Coquina Cliff Circle  
Ormond Beach, FL 32174

\*\*\*\*\*

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

10/1/07

Date



Signature/Incorporator

10/1/07

Date