

P07000114595

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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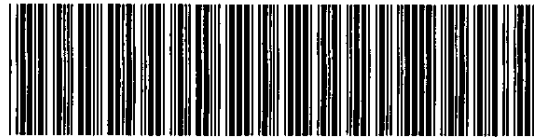
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
10/18

COVER LETTER

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

SUBJECT: PUBLIC CLAIMS ADJUSTERS, 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 ☐ \$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: ROBERT A. MADDEN
Name (Printed or typed)

14000 CYPRESS COURT
Address

MIAMI LAKES, FL. 33014
City, State & Zip

305-823-3933
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:

PUBLIC CLAIMS ADJUSTERS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14000 CYPRESS COURT
MIAMI LAKES, FLORIDA 33014

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROCESS INSURANCE CLAIMS AS A
LICENSED PUBLIC ADJUSTER.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ROBERT A. MADDEN, PRESIDENT
14000 CYPRESS COURT
MIAMI LAKES, FL. 33014

CHARLITA K. MADDEN, VICE PRESIDENT
14000 CYPRESS COURT
MIAMI LAKES, FL. 33014

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ARTICLE VI REGISTERED AGENT

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

ROBERT A. MADDEN
14000 CYPRESS COURT
MIAMI LAKES, FL. 33014

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT A. MADDEN
14000 CYPRESS COURT
MIAMI LAKES, FL. 33014

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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

Robert A. Madden

Signature/Registered Agent

Robert A. Madden

10/11/07

Date

10/11/07