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08 JAN 30 PM 5:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008-3794

COVER LETTER

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

SUBJECT: Ludden Insurance 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: Edward J. Ludden
Name (Printed or typed)

8931 Conference Dr. # 7
Address

Ft. Myers, Fl. 33919
City, State & Zip

239-437-5800
Daytime Telephone number

email - ludden1 @ earth
link, net

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 24, 2008

EDWARD J LUDDEN
8931 CONFERENCE DR
#7
FT MYERS, FL 33919

SUBJECT: LUDDEN INSURANCE INC.
Ref. Number: W08000003794

We have received your document for LUDDEN INSURANCE 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):

A corporation may not serve as its own registered agent. Please designate the individual whose typed signature appears on the registered agent signature line.

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

Please return the corrected 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) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 808A00005061

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:

Ludden Insurance Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*8931 Conference Dr. # 7
Ft. Myers, Fl. 33919*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sales & Service of Insurance

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):

Edward J. Ludden Pres.

Timothy J. Ludden V.P.

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Edward J. Ludden
8931 Conference Dr. #7
Ft. Myers, FL 33915

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Edward J. Ludden
8931 Conference Dr. #7
Ft. Myers, FL 33915

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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

Edward J. Ludden

Signature/Registered Agent

1/28/08

Date

Edward J. Ludden

Signature/Incorporator

1/28/08

Date