

PD8600037639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

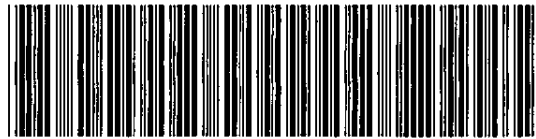
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** Sea Breeze 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 + \$8.75  
Filing Fee  
& Certificate of Status  
& Certified Copy

*Total \$87.50*

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** John Honaker

Name (Printed or typed)

13376 Coluccio St.

Address

Venice, Florida 34293

City, State & Zip

941-586-4887

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:

Sea Breeze Insurance Agency, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

13376 Coluccio St., Venice, Florida 34293

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The sale of insurance products, training of insurance products and education of insurance products.

### **ARTICLE IV SHARES**

The number of shares of stock is:

50,000

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

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

John W. Honaker, President  
13376 Coluccio St.  
Venice, Florida 34293

### **ARTICLE VI REGISTERED AGENT**

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

John W. Honaker  
13376 Coluccio St.  
Venice, Florida 34293

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

John W. Honaker  
13376 Coluccio St.  
Venice, Florida 34293

\*\*\*\*\*

*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*

John W. Honaker  
Signature/Registered Agent

4-10-2008  
Date

John W. Honaker  
Signature/Incorporator

4-10-2008  
Date

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2008 APR 14 PM 3:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA