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COVER LETTER

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

SUBJECT:	CREATIVE LIFE INSURANCE, INC.				
bebaze i.	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an ori	iginal and one (1) copy of the artic	eles of incorporation and	l a check for:		
□ # 7 0.00	⊠ \$78.75	□ #30.35	□ \$87.50		
□ \$70.00	— *· -··-	\$78.75			
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy		
	& Certificate of Status	& Certified Copy	& Certificate of		
			Status		
		ADDITIONAL CO			
200	i de la companya della companya della companya de la companya della companya dell				
FROM: SAL GORGE					
Name (Printed or typed)					
5485 WILES ROAD, SUITE 406					
Address					
COCONUT CREEK, FL 33073 City, State & Zip					
City, State & Zip					
	054 000 0005				
954-933-9985 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:

Creative Life Insurance, Inc.

ARTICLE II PRINCIPAL OFFICE

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

5485 WILES ROAD, SUITE 406 COCONUT CREEK, FL 33073

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: INSURANCE SALES

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
SAL GORGE, PRESIDENT - 8195 NW 47TH DRIVE, CORAL SPRINGS, FL 33067
NANCY GORGE, VICE PRESIDENT - 8195 NW 47TH DRIVE, CORAL SPRINGS, FL 33067

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: SAL GORGE - 5485 WILES ROAD, SUITE 406, COCONUT CREEK, FL 33073

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: SAL GORGE - 5485 WILES ROAD, SUITE 406, COCONUT CREEK, FL 33073

****	**************	****
ertifi certifi	ng been named as registered agent to accept service of process for the above stated c icate, I am familial with and accept the appointment as registered agent and agree to a	corporation at the place designated in this ct in this capacity
	1.040/	
(X)_		<u>5/13/08</u>
	Signature/Registered Agent SAL Gorge	' Date
(x)	al al	5/13/08
	Signature/Incorporator SAL Gorge	Date