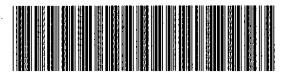
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Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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# **COVER LETTER**

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

SUBJECT: English Insurance Group, Inc. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)				
	inal and one (1) copy of the artic			
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Trace Eng Name 8781 Largo M			
	Fort Myers, city,	, - ш., -		

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:

English Insurance Group, Inc.

## ARTICLE II PRINCIPAL OFFICE

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

8781 Largo mar Drive Ft. Myers Fl 33967

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Marketing Insurance



### 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):

Trace English - President

8781 Largo Mar Drive

Ft. myers F1 33967

### ARTICLE VI REGISTERED AGENT

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

Trace English 8781 Largo Mar Drive Fort Myers Fl 33967

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Trace English 8781 Kargo Mar Drive Fort Myers Fl 33967

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/Incorporator

Signature/Incorporator