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(Requestor's Name)				
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☐ WAIT	MAIL			
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Certificates	s of Status			
Special Instructions to Filing Officer:				
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COVER LETTER

SECRETARY OF STATE DIVISION OF CORPORATIONS

08 SEP -8 PM 1:58

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

SUBJECT: CHOICE	PROPOSED CORPOR	IC. ATE NAMË – <u>MUST INCI</u>	TIDE CHEETY)
Enclosed are an orig	inal and one (1) copy of the art		-
☑ \$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
FROM: DA	VID M. SORRELL		
11.0m. <u>Dr</u>		(Printed or typed)	
	8345 GUNN HIGHWAY	Address	<u>-</u>
	TAMPA, FL 33626-1608	v, State & Zip	
	813-961-6110 EXT. 306	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)

FILED SEGRETARY OF STATE DIVISION OF CORPORATIONS

<u>ARTICLE I NAME</u>

08 SEP -8 PM 1:58

The name of the corporation shall be:

CHOICE PLUS PREMIUM FINANCE, INC.

ARTICLE II PRINCIPAL OFFICE

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

8345 GUNN HIGHWAY TAMPA, FL 33626-1608

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FINANCING INSURANCE PREMIUMS

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
DAVID M. SORRELL/PRESIDENT & SECRETARY
18916 LAKE'S EDGE WAY
ODESSA, FL 33556-2264
JULIE L. SORRELL/VICE-PRESIDENT & TREASURER
18916 LAKE'S EDGE WAY
ODESSA, FL 33556-2264

ARTICLE VI REGISTERED AGENT

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

DAVID M. SORRELL 18916 LAKE'S EDGE WAY ODESSA, FL 33556-2264

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DAVID M. SORRELL 18916 LAKE'S EDGE WAY ODESSA, FL 33556-2264

Having been named as registered agent to accept service of process for the above stated corporation at the place designate	ated in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	

jim. Suno	09/02/2008	
Signature/Registered Agent	Date	
Ji m. Sua	09/02/2008	
Signature/Incorporator	Date	