

P08000091268

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

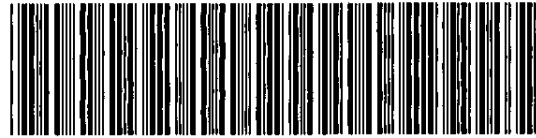
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 OCT -7 AM 11:34
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
80-5-01
200

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Vortex Claims, Inc.

- Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

Signature

Requested by:

Seth 10/7 11:00

Name

Date

Time

Walk-In

Will Pick Up

ARTICLES OF INCORPORATION
OF
VORTEX CLAIMS, INC.

We, the undersigned, the subscribers to these Articles of Incorporation, being persons of legal age, do hereby desire to form a corporation under the laws of the State of Florida and do hereby adopt the following Articles of Incorporation.

ARTICLE I

The name of this corporation is VORTEX CLAIMS, INC.

ARTICLE II

The duration of this corporation shall be perpetual. The date and time of the commencement of the corporate existence shall begin at the time of the filing of the Articles of Incorporation with The Department of State.

ARTICLE III

The purpose of this corporation shall be any and all lawful business purposes as set forth by Florida Statutes.

ARTICLE IV

The maximum number of shares of stock that this corporation is authorized to issue shall be 100 shares of common stock. Each share shall have the par value of \$1.00 per share and shall consist of one class only.

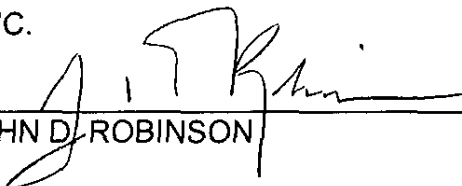
ARTICLE V

The street address of the initial principal office of this corporation is 384 West Burleigh Blvd., Tavares, Florida 32778 and the mailing address of this corporation is the same.

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TALLAHASSEE, FLORIDA

ACCEPTANCE OF REGISTERED AGENT

I, JOHN D. ROBINSON, do hereby accept the office of Registered Agent of the corporation known as VORTEX CLAIMS, INC.



JOHN D. ROBINSON

STATE OF FLORIDA
COUNTY OF ORANGE

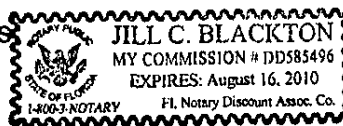
BEFORE ME, the undersigned officer, duly authorized in the State and County aforesaid to administer oaths and take acknowledgments, personally appeared JOHN D. ROBINSON, known to me to be the person described as the Registered Agent of the corporation known as VORTEX CLAIMS, INC. and he acknowledged before me that he executed the same for the purposes therein expressed.

6 WITNESS my hand and official seal in the State and County last aforesaid this day of October, 2008.



NOTARY PUBLIC, STATE OF FLORIDA

My Commission Expires



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TALLAHASSEE, FLORIDA