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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
(Bodument Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer
Special Instructions to Filing Officer:
added address

Office Use Only

Laura Pedersor

National Dr. Loxahatchee

FL 33470 3125109

16084 E Grand



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COVER LETTER

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

SUBJECT: Affordable Insurance 4 All, Inc.				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$70.00	\$78.75	□ \$78.75	☑ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
i mig i cc	& Certificate of Status	& Certified Copy	Certified Copy	
		co continua copy	& Certificate of	
			Status	
·		ADDITIONAL COPY REQUIRED		
FROM: Laura Pedersen				
Name (Printed or typed)				
16084 E. Grand National Dr. Address				
Loxahatchee, Fl. 33470 City, State & Zip				
561-512-8900				
Daytime Telephone number				

NOTE: 'Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 23, 2009

LAURA PEDERSON 16084 E GRAND NATIONAL DR LOXAHATCHEE, FL 33470

SUBJECT: AFFORDABLE INSURANCE 4 ALL, INC.

Ref. Number: W09000013580

We have received your document for AFFORDABLE INSURANCE 4 ALL, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 309A00009744

Paisley A Alford Clerk New Filing Section

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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:

Affordable Insurance 4 All, Inc.

ARTICLE II PRINCIPAL OFFICE

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

16084 E. Grand National Dr. Loxahatchee, FL 33470

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Insurance Consultations & Sales of insurance & medical products

ARTICLE IV **SHARES**

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

16084 E. Grand National Drive Loxahatchee, FL. 33470

ARTICLE VI REGISTERED AGENT

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

16084 E. Grand National Drive Loxahatchee, FL. 33470

INCORPORATOR ARTICLE VII

The <u>name and address</u> of the Incorporator is:

Laura Pedersen 16084 E. Grand National Drive Loxahatchee, FL. 33470

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 fapiliar with and accept the appointment as registered agent and agree to act in this capacity 3/18/2009 ignature/Registered Agent Date 3/18/2009 Signature/Incorporator

Date