

P090000SF010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

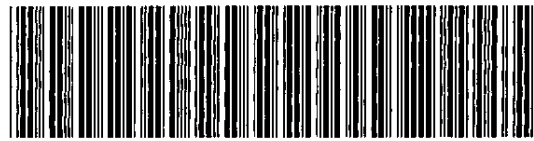
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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**FILED**  
2009 JUL -7 AM 11:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers JUL 08 2009

**COVER LETTER**

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

**SUBJECT:** GRAHAM INSURANCE CONSULTANTS, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy  
 \$87.50 Filing Fee, Certified Copy & Certificate of Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** DAVID A. GRAHAM  
Name (Printed or typed)

11420 U. S. HIGHWAY ONE  
Address

NORTH PALM BEACH, FL 33408  
City, State & Zip

305-409-8046  
Daytime Telephone number

dagdag30@hotmail.com  
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

**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:

GRAHAM INSURANCE CONSULTANTS, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

11420 U.S. HIGHWAY ONE, NORTH PALM BEACH, FL 33408

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY PURPOSE ALLOWED UNDER FLORIDA LAW

**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):

DAVID A. GRAHAM, PRESIDENT AND DIRECTOR

**ARTICLE VI REGISTERED AGENT**

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

DAVID A. GRAHAM, 11420 U.S. HIGHWAY ONE, NORTH PALM BEACH, FL 33408

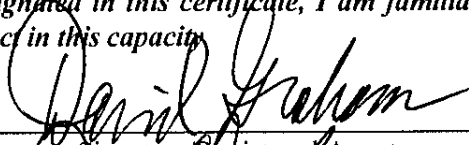

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

DAVID A. GRAHAM, 11420 U. S. HIGHWAY ONE, NORTH PALM BEACH, FL 33408

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TALLAHASSEE, FLORIDA  
FILED

\*\*\*\*\*  
*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/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

6/8/09  
Date  
6/8/09  
Date