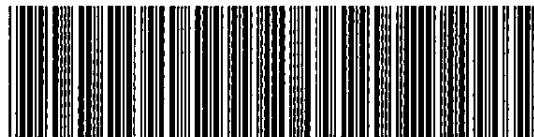


PO9000079679

(Requestor's Name)



500160813205

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

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AND  
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09 SEP 24 PM 3:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14

## COVER LETTER

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

**SUBJECT:** Savant Insurance Agency, 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       \$78.75  
Filing Fee      Filing Fee  
& Certificate of Status

\$78.75       \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
& Certificate of      & Certificate of  
Status      Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Lisa Savant  
Name (Printed or typed)

7037 NW 62 Terrace  
Address

Parkland, FL 33067  
City, State & Zip

954-346-0509  
Daytime Telephone number

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

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

APPROVED  
AND  
FILED

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

09 SEP 24 PM 3:18

**ARTICLE I NAME**

The name of the corporation shall be: SAVANT INSURANCE AGENCY, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address of this corporation shall be 7037 NW 62 Terrace, Parkland, FL 33067.

**ARTICLE III PURPOSE**

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

**ARTICLE IV SHARES**

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having \$1.00 par value per share.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have one Director, initially. The name and address of the initial member of the Board of Directors are:

Lisa Savant, Director, 7037 NW 62 Terrace, Parkland, FL 33067.

**ARTICLE VI REGISTERED AGENT**

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

Lisa Savant, 7037 NW 62 Terrace, Parkland, FL 33067

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is: Lisa Savant, 7037 NW 62 Terrace, Parkland, FL 33067

\*\*\*\*\*

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

Lisa Savant

9-21-09

Lisa Savant  
Signature/Registered Agent

Date

Lisa Savant

9-21-09

Lisa Savant  
Signature/Incorporator

Date