

Div SEP 30 2009 3:32 PM

CAPITAL CONNECTION

NO. 5514

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Florida Department of State
Division of Corporations
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Electronic Filing Cover Sheet

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To:
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Fax Number : (850) 617-6381

From:
Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : 120000000257
Phone : (850) 224-8870
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RECEIVED
09 SEP 30 PM 4:11
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

Trusted Adjusters, Inc

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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September 30, 2009

FLORIDA DEPARTMENT OF STATE

YOUR CAPITAL CONNECTION, INC. Division of Corporations

SUBJECT: TRUSTED ADJUSTERS, INC

REF: WD9000043689

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and resubmit the complete document, including the electronic filing cover sheet.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

If you have any further questions concerning your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II
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NO. 5314 P. 3

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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: **Trusted Adjusters, Inc**

ARTICLE II PRINCIPAL OFFICE

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

*5722 S Flamingo Rd #329
Cooper City, FL 33330*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To market and provide public adjusting services

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Howard Goldberg President 5722 S Flamingo Rd #329 Cooper City, FL 33330

ARTICLE VI REGISTERED AGENT

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

Howard Goldberg 5722 S Flamingo Rd #329 Cooper City, FL 33330

ARTICLE VII INCORPORATOR

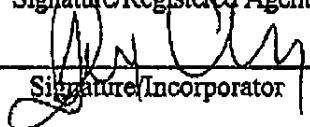
The name and address of the Incorporator is:

Howard Goldberg 5722 S Flamingo Rd #329 Cooper City, FL 33330

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



9/29/09
Date
9/29/09
Date