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

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

BJECT: ASSUR	AN CORP.			
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)	
losed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:	
\$70.00	\$78.75	\$78.75	☑ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
_	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
		A D D TOTAL A CO	Status	
		ADDITIONAL COPY REQUIRED		
FROM: EN	A MOULTON			
	Nam	ne (Printed or typed)		
332	5 SW LUDLOW STREET		ŗ	2
		Address		□
			;	2010 APR 19
POI	RT ST LUCIE, FLORIDA 34953			9
	City	, State & Zip		PH
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(954	4) 665-0660 Daytime	Telephone number	····	-
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NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

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:

ASSURAN CORP.

FIRED SECRETARY OF STATE DIVISION OF CORPORATION.

2010 APR 19 PM 4: 00

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 3325 SW LUDLOW STREET, PORT ST LUCIE FL 34953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO CONDUCT ALL LEGAL BUSINESS IN THE STATE

ARTICLE IV SHARES

The number of shares of stock is: ONE HUNDRED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ENA MOULTON - 3325 SW LUDLOW STREET PORT ST LUCIE FL

STREET PORT ST LUCIE FL 34953 - PRESIDENT, SECRETARY, TREASURER

ARTICLE VI REGISTERED AGENT

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

ENA MOULTON - 3325 SW LUDLOW STREET PORT ST LUCIE FL 34953

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: ENA MOULTON - 3325 SW LUDLOW STREET PORT ST LUCIE FL 34953

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

Cra Moulto

Signature/Incorporator

Apar (1, 201)

Date

Date

Date