

# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160 Phone

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## FLORIDA PROFIT/NON PROFIT CORPORATION FLORIDA GIA INSURANCE INC.

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A1a Incorporation



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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:

FLORIDA GIA INSURANCE INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

315 S.E. MIZNER BLVD SUITE 208 BOCA RATON, FLORIDA 33432

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

#### ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

## ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:

**PRESIDENT** 

CLAUDIA M GIARRATANA

315 S.E. MIZNER BLVD SUITE 208

**BOCA RATON, FLORIDA 33432** 

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## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

CLAUDIA M GIARRATANA 315 S.E. MIZNER BLVD SUITE 208 **BOCA RATON, FLORIDA 33432** 

#### ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:

CLAUDIA M GIARRATANA 315 S.E. MIZNER BLVD SUITE 208 **BOCA RATON, FLORIDA 33432** 

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.

CLAUDIA M GIARRATANA /

 $\frac{7/27}{2010}$ Date

CLAUDIA M-GIARRATANA /