

P110000057836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

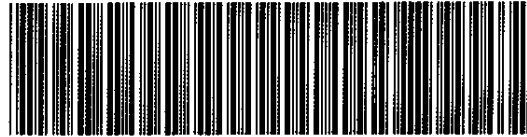
(Document Number)

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

Special Instructions to Filing Officer:

~~WH-29504~~

Office Use Only



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05/26/11--01016--014 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 JUN 16 PM 12:52

RECEIVED  
AND  
FILED

## COVER LETTER

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

SUBJECT: Capitol Insurance Solutions, 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: Todd A. Hill  
Name (Printed or typed)

9541 Tavernier Drive  
Address

Boca Raton, Florida 33496  
City, State & Zip

(954)605-5794  
Daytime Telephone number

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

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 27, 2011

TODD A. HILL  
9541 TAVERNIER DRIVE  
BOCA RATON, FL 33496

SUBJECT: CAPITOL INSURANCE SOLUTIONS, INC.  
Ref. Number: W11000029504

We have received your document for CAPITOL INSURANCE SOLUTIONS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 211A00013209

# 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: Capitol Insurance Solutions, Inc.

## ARTICLE II PRINCIPAL OFFICE

Principal street address  
9541 Tavernier Drive  
Boca Raton, Florida 33496

Mailing address, if different is:

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This business was created to sell insurance products under this business name

## ARTICLE IV SHARES

The number of shares of stock is: 1

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Todd A. Hill - Owner/President  
Address: 9541 Tavernier Drive  
Boca Raton, Florida 33496

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

## ARTICLE VI REGISTERED AGENT

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

Name: Todd A. Hill  
Address: 9541 Tavernier Drive  
Boca Raton, Florida 33496

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Todd A. Hill  
Address: 9541 Tavernier Drive  
Boca Raton, Florida 33496

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

Todd A. Hill Todd A. Hill

Required Signature/Registered Agent

5/23/11  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Todd A. Hill Todd A. Hill

Required Signature/Incorporator

5/23/11  
Date

11 JUN 16 PM 12:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

APPROVED  
AND  
FILED