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2011 OCT 20 PM 4:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch OCT 20 2011

## COVER LETTER

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

SUBJECT: American Investment Administrators, 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: Shane Northrop

Name (Printed or typed)

13700 Six Mile Cypress Pkwy. Ste 2

Address

Fort Myers, FL 33912

City, State & Zip

(239) 271-2488

Daytime Telephone number

shane@northropfinancial.com

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

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

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: American Investment Administrators, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
13700 Six Mile Cypress Pkwy.  
Suite 2  
Fort Myers, FL 33912

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Adminstrating and Managing Investments

**ARTICLE IV SHARES**

The number of shares of stock is: 100 shares

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

Name and Title: Shane Northrop, Owner  
Address: 13700 Six Mile Cypress Pkwy.  
Suite 2  
Fort Myers, FL 33912

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

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
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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: Shane Northrop  
Address: 13700 Six Mile Cypress Pkwy. Ste 2  
Fort Myers, FL 33912

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Shane Northrop  
Address: 13700 Six Mile Cypress Pkwy. Ste 2  
Fort Myers, FL 33912

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

  
Required Signature/Registered Agent

10/17/2011

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.

  
Required Signature/Incorporator

10/17/2011

Date

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TALLAHASSEE, FLORIDA