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Florida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850)617-6381

## From:

Account Name : LAW OFFICE OF DANIEL C. PERRI  
Account Number : I20040000119  
Phone : (850)651-3011  
Fax Number : (850)651-3306

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: haytuc@aol.com

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## FLORIDA PROFIT/NON PROFIT CORPORATION

Ellis Insurance Agency, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

12 FEB -2 PM 4:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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J. Shivers FEB 03 2012

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**ARTICLES OF INCORPORATION  
OF  
ELLIS INSURANCE AGENCY, INC.**

The undersigned subscriber, being the incorporator of these Articles of Incorporation, hereby form a corporation under the laws of the State of Florida, Florida Statutes, Chapter 607 as follows:

**ARTICLE I  
NAME**

The name of this corporation is Ellis Insurance Agency, Inc.

**ARTICLE II  
DURATION**

This corporation shall exist perpetually.

**ARTICLE III  
CORPORATE PURPOSE AND POWERS**

This corporation is organized for the purpose of conducting any and all lawful business not in conflict with the Statutes of the State of Florida. This corporation shall have all corporate powers enumerated in Chapter 607 mentioned above.

**ARTICLE IV  
CAPITAL STOCK**

The maximum number of shares of stock that this Corporation is authorized to have is 1,000 shares of common stock having a nominal or par value of One Dollar (\$1.00) per share, which stock shall have the entire voting power of the corporation.

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**ARTICLE V**  
**INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of this corporation is 4 Eleventh Avenue, Suite 1, Shalimar, Florida 32579, and the name of the initial registered agent at that address is DANIEL C. PERRI.

**ARTICLE VI**  
**INITIAL BOARD OF DIRECTORS**

The number of directors constituting the initial Board of Directors is one (1). The name and address of the person who is to serve as the initial Board of Directors is as follows:

Tina G. Ellis  
3814 Indian Trail  
Destin, Florida 32541

**ARTICLE VII**  
**INITIAL INCORPORATOR**

The name and address of the initial incorporator of this corporation are as follows:

Tina G. Ellis  
3814 Indian Trail  
Destin, Florida 32541

**ARTICLE VIII**  
**PRINCIPAL OFFICE ADDRESS AND MAILING ADDRESS**

The principal office address of the Corporation is 3814 Indian Trail, Destin, Florida 32541. The mailing address for the Corporation is 3814 Indian Trail, Destin, Florida 32541.


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**ARTICLE IX**  
**AMENDMENT**

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by vote of 51% of the stock entitled to vote thereon. Any action of the stockholders may be taken without a meeting when consent in writing setting forth the action so taken is signed by all the persons who would be entitled to vote upon such action at a meeting and filed with the Secretary of the Corporation as part of the corporate records.

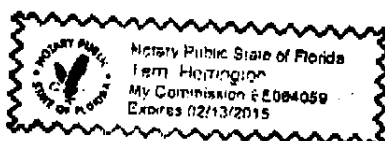
IN WITNESS WHEREOF, the undersigned, being all of the incorporators hereinbefore named, have hereunto set her hand and seal on this the 31<sup>st</sup> day of January, 2012, for the purpose of forming a corporation to do business both within and without the State of Florida and do make and file in the Office of the Secretary of State of Florida these Articles of Incorporation and certify that the facts herein stated above are true.

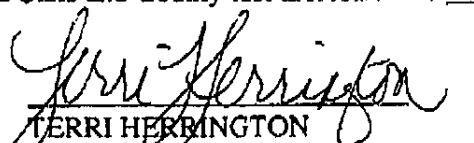
  
TINA G. ELLIS  
Incorporator

STATE OF FLORIDA  
COUNTY OF OKALOOSA

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared TINA G. ELLIS, either personally know to me or has produced a valid driver's license as identification to be the individual described in and who executed the foregoing Articles of Incorporation and he acknowledged to and before me that he executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the State and County last aforesaid this 31<sup>st</sup> day of January, 2012.



  
TERRI HERRINGTON  
Notary Public  
My Commission Expires: 02/13/2015

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**CERTIFICATE DESIGNATING PLACE OF BUSINESS  
OR DOMICILE FOR THE SERVICE OF PROCESS  
WITHIN THIS STATE, NAMING AGENT UPON  
WHOM PROCESS MAY BE SERVED**

Pursuant to Section 48.091 and 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of Florida, submits the following statement designating the registered office and registered agent in Florida.

1. The name of the corporation is Ellis Insurance Agency, Inc.
2. The address of the registered office is 4 Eleventh Avenue, Suite 1, Shalimar, Florida 32579.
3. The name of the registered agent at the registered office is DANIEL C. PERRI.

Dated this 31<sup>st</sup> day of January, 2012.

  
TINA G. ELLIS  
Incorporator

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above named corporation, at the place designated in this certificate, I hereby accept appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all Florida Statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dated this 31<sup>st</sup> day of January, 2012.

  
DANIEL C. PERRI

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