

P 12000020465

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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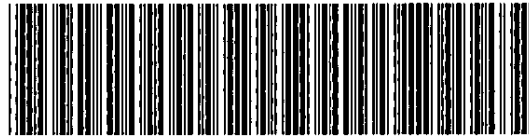
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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J. Shivers FEB 29 2012

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2012 FEB 29 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Dave Johnson Insurance, 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: Ken Arena Accounting & Tax Service
Name (Printed or typed)

912 Lithia Pinecrest Road
Address

Brandon, FL 33511-6121
City, State & Zip

(813) 341-2501
Daytime Telephone number

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: Dave Johnson Insurance, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
910 Lithia Pinecrest Road
Brandon, FL 33511-6121

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
to engage in providing insurance and financial services permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: authorized at two hundred (200) shares of common stock - each having a \$.01 par value per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Dave Johnson (P/V/S/T/D)</u>	Name and Title: _____
Address: <u>2212 Harvard Court</u>	Address: _____
<u>Riverview, FL 33578-4205</u>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: Ken Arena, EA
Address: 912 Lithia Pinecrest Road
Brandon, FL 33511-6121

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dave Johnson
Address: 910 Lithia Pinecrest Road
Brandon, FL 33511-6121

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

Ken Arena EA
Required Signature/Registered Agent

February 27, 2012
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.

Dave Johnson
Required Signature/Incorporator

February 27, 2012
Date

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TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION (IN ACCORDANCE WITH Chapter 607 and/or
Chapter 621, F.S. (Profit)**

(Continued)

ARTICLE VIII EFFECTIVE DATE

The effective date of these articles of incorporation is **February 27, 2012.**

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**