

P13 000013177

(Requestor's Name)

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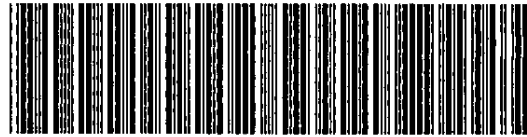
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FL 32399

R Burch FEB 8 2013

## COVER LETTER

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

SUBJECT: **INSURANCE QUOTES 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: **Patrick Cyrus**

Name (Printed or typed)

**120 E Oakland Park Blvd. #105**

Address

**Fort Lauderdale FL. 33334**

City, State & Zip

**954-284-7686**

Daytime Telephone number

**Pcyrus1@msn.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: INSURANCE QUOTES INC.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

120 E Oakland Park Blvd. # 105

Fort Lauderdale, FL. 33334

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: Conduct Any and all lawful business.

**ARTICLE IV    SHARES**

The number of shares of stock is: 100

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

Name and Title: Patrick Cyrus (President)

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

Address 120 E Oakland Park Blvd.

Address: \_\_\_\_\_

Suite 105

Fort Lauderdale, FL 33334

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL 32301

(conti.)

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: Patrick Cyrus

Address: 120 E Oakland Park Blvd #105

Fort Lauderdale, FL 33334

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Patrick Cyrus

Address: 120 E Oakland Park Blvd.#105

Fort Lauderdale, FL. 33334

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TALLAHASSEE, FL 32301

*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*

Patrick Cyrus  
Required Signature/Registered Agent

2/5/2013  
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.*

Patrick Cyrus  
Required Signature/Incorporator

2/5/2013  
Date