PBUUCOCO

| (Requestor's Name) | | | | |
|---|--------------------|-----------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (Cit | ty/State/Zip/Phone | = #) | | |
| PICK-UP | ☐ WAIT | MAIL MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | , | | | |
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Office Use Only



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COVER LETTER

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

| SUBJECT: AdN | lax Corp. | | |
|----------------------|--|-------------------------------------|--|
| | (PROPOSED CORPOR | ATE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an orig | inal and one (1) copy of the ar | ticles of incorporation and | d 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 CO | DPY REQUIRED |
| FROM: R | onald J. Manera | | |
| | Nam | e (Printed or typed) | |
| P | O Box 31551 | | |
| | | Address | |
| Pa | alm Beach Gard | | 0 |
| | City | , State & Zip | |
| 56 | 31-718-0745 | | |

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

Daytime Telephone number

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

| ARTICLE IV SHARES The number of shares of stock is: Name and Title: Address Name and Title: | ARTICLE I NAME The name of the corporation | | DIVISION OF CORPORATIONS |
|--|--|------------------------------|-----------------------------------|
| ARTICLE IV SHARES The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address Address: Name and Title: Address: Address: Name and Title: Address: Address: | | Principal street address | Mailing address, if different is: |
| ARTICLE IV SHARES The number of shares of stock is: Name and Title: Address Address: Name and Title: Address Address: Name and Title: Address Address: Address: | Royal Palm | Beach, FL 33411 | Palm Beach Gardens, FL 33420 |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Ronald J. Manera, President Address 100 Miramar Ave Royal Palm Beach, FL 33420 Name and Title: Name and Title: Address Name and Title: Name and Title: Address: Addre | | | and all lawful business. |
| Name and Title: Address Name and Title: Address Name and Title: Address: Name and Title: Address: Name and Title: Address: | | | |
| Name and Title: Address Name and Title: Address Name and Title: Address: Name and Title: Address: Name and Title: Address: | | | |
| Name and Title: Address Royal Palm Beach, FL 33420 Name and Title: Address Name and Title: Name and Title: Address Name and Title: Address: Name and Title: Address: Address: Address: | The number of shares of | TIAL OFFICERS AND/OR DIRECTO | |
| Name and Title: Address: Name and Title: Address: Name and Title: Address: Name and Title: Address: Address: | | D: | |
| Address Address: Name and Title: Address Address: | Address | | Address: |
| Name and Title: Address Address: | Name and Title | : | Name and Title: |
| Name and Title: Name and Title: Address Address: | Address | | |
| Address Address: | | | |
| | Name and Title | · | Name and Title: |
| | Address | | Address: |
| | | | |

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

| Name and | a litte: | Name and Title: 13 DEC 8 PH 2: 85 |
|--|--|---|
| Address | | Address: |
| | | |
| | | |
| ARTICLE VI | REGISTERED AGENT orida street address (P.O. Box NOT acceptable) or | Etha rapintared agent in |
| Name: | Ronald J. Manera | i die registered agent is: |
| Address: | 100 Miramar Ave | _ |
| | Royal Palm Beach, FL 33420 | _ |
| ARTICLE VII | INCORPORATOR | |
| The name and ad | dress of the Incorporator is: | |
| Name: | Ronald J. Manera | _ |
| Address: | 100 Miramar Ave | _ |
| | Royal Palm Beach, FL 33420 | _ |
| | ned as registered agent to accept service of proces am familiar with and accept the appointment as re | s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity |
| | 1/2 | 12/15/2013 |
| | Required Signature/Registered Agent | Date |
| I submit this doc document to the l | um <u>ent and aff</u> irm that the facts stated herein are Department of State constitutes a third degree feloi | true. I am aware that the false information submitted in a ny as provided for in s.817.155, F.S. |
| | 1/2 | 12/15/2013 |
| | Required Signature/Incorporator | Date |