

P 14000090071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

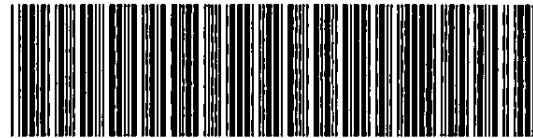
Certified Copies _____ Certificates of Status _____

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09/12/14--01004--003 **87.50

FILED
14 NOV -3 AM 11:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/5/14

COVER LETTER

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

SUBJECT: 1st Choice Insurance Group, 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: Nicole Farbman
Name (Printed or typed)
5594 NW 90th Terrace
Address
Sunrise FL 33351
City, State & Zip
954 - 394 2105
Daytime Telephone number
NJFICE23 @ AOL.COM
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL 32314

14 NOV -3 AM 11:51

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 27, 2014

NICOLE FARBMAN
5200 SOUTH STATE ROAD 7
FORT LAUDERDALE, FL 33314

SUBJECT: 1ST CHOICE INSURANCE GROUP, INC.
Ref. Number: W14000056255

We have received your document for 1ST CHOICE INSURANCE GROUP, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 214A00022707

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14 NOV - 3 AM 11:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 23, 2014

NICOLE FARBMAN
5200 SOUTH STATE ROAD 7
FORT LAUDERDALE, FL 33314

SUBJECT: 1ST CHOICE INSURANCE GROUP, INC.
Ref. Number: W14000056255

RECEIVED
14 NOV -3 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for 1ST CHOICE INSURANCE GROUP, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 214A00022707

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14 NOV -3 AM 11:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 15, 2014

NICOLE FARBMAN
5200 SOUTH STATE ROAD 7
FORT LAUDERDALE, FL 33314

SUBJECT: FIRST CHOICE INSURANCE, INC
Ref. Number: W14000056255

FILED
14 NOV -3 AM 11:51
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

We have received your document for FIRST CHOICE INSURANCE, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 914A00019712

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: 1st Choice Insurance Group, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5594 NW 90th Terrace
Sunrise, FL 33351

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Insurance business
Becoming able to sell insurance
with a 220 license.

ARTICLE IV SHARES

The number of shares of stock is: 1.2

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nicole Farbman Name and Title: President

Address: 5594 NW 90th Address: _____
Terrace, _____
Sunrise FL 33351 _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(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: Nicole Farbman
Address: 5594 NW 90th Terrace
Ft. lauderdale FL 33351

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nicole Farbman
Address: 5594 NW 90th Terrace
Sunrise FL 33351

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

Nicole Farbman

Required Signature/Registered Agent

10/7/14
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.

Nicole Farbman

Required Signature/Incorporator

10/7/14
Date

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TALLAHASSEE, FLORIDA