

P/4000099/71

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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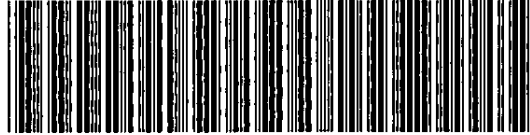
(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: **Nicholas A. Smith Ins. & Fin. Svcs. 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: **Nicholas Smith**
Name (Printed or typed)
11125 Park Blvd. Suite 104-181
Address
Seminole, FL 33772
City, State & Zip
318-505-8263
Daytime Telephone number
nick.smith082808@gmail.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: Nicholas A. Smith Ins. & Fin. Svcs. Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

14839 Feather Cove Ln.

Clearwater, FL 33762

Mailing address, if different is:

11125 Park Blvd., Suite 104-181

Seminole, FL 33772

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The sale and service of insurance and financial services products

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nicholas A. Smith President

Address 14839 Feather Cove Ln.
Clearwater, FL 33762

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FL 32399

(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: Nicholas A. Smith
Address: 14839 Feather Cove Ln.
Clearwater, FL 33762

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nicholas A. Smith
Address: 14839 Feather Cove Ln.
Clearwater, FL 33762

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

Nicholas A. Smith
Nicholas A. Smith
Required Signature/Registered Agent

12/5/14
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.

Nicholas A. Smith
Nicholas A. Smith
Required Signature/Incorporator

12/5/14
Date