

P1S000007S133

(Requestor's Name)

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(Business Entity Name)

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SECRETARY OF STATE
AUDREY S. P. (09/15)

SEP 15 2015

W PAINTER

COVER LETTER

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

SUBJECT: Bottom Dollar 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: Aspire Insurance Inc.
Name (Printed or typed)

2253 Green Hedges Way, suite 101
Address

Wesley Chapel FL 33544
City, State & Zip

813-436-3500.
Daytime Telephone number

Phil@AspireFlorida.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: Bottom Dollar Insurance Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2253 Green Hedges Way Suite 101
Wesley Chapel FL 33544

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all Lawful business
allowed in Florida.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Aspire Insurance Inc. Pres.

Name and Title:

Pres.

Address

2253 Green Hedges Way
Suite 101

Address:

Wesley Chapel FL 33544

Name and Title:

Phil Schepens - VP

Name and Title:

Address

2253 Green Hedges Way
Suite 101

Address:

Wesley Chapel FL 33544

Name and Title:

Name and Title:

Address

Address:

15 SEP - 1 PM 3:42
SECRET
OFFICIALS
1046

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: Phil Schepens.

Address:

2253 Green Hedges Way Suite 101
Wesley Chapel FL 33544

FILED
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CLERK OF COURT
JULIA A. BROWN
101 LAKEWAY
SUITE 100
WESLEY CHAPEL, FL 33544

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Phil Schepens.

Address:

2253 Green Hedges Way Suite 101
Wesley Chapel FL 33544

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 9-2-2015. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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




Required Signature/Registered Agent

9-2-15

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.



Required Signature/Incorporator

9-2-15

Date