

(Requestor's Name)				
(Address)				
(Address)				
,				
(City/State/Zip/Phone #)				
(Oity/State/Zip/Fillone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to Filing Officer.				

Office Use Only



100280992641

81/19/16--01003--016 **87.50

SUPPROTENCY OF FILM

16 JAN 19 PH I2: 03

11 16 5% or NYF 81

JAN 20 2018 T SCHROEDER

COVER LETTER

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

SUBJECT: US CO.	ATAL PROPERTY & CASUALTY	INSURANCE COMPANY	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles 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 COPY REQUIRED	
FROM:	EE RODDENBERRY Name BOX 3635	e (Printed or typed)	· · · · · · · · · · · · · · · · · · ·
		Address	
TA	LLAHASSEE FL 32315		
	City,	State & Zip	
850	2240141		
	Daytime T	elephone number	
LRO	DDDENBERRY@GBB-LAW.COM	ſ	
	E-mail address: (to be use	d for future annual report	notification)

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

ARTICLES OF INCORPORATION FOR US COASTAL PROPERTY & CASUALTY INSURANCE COMPANY

The undersigned person, acting as incorporator of US COASTAL PROPERTY & CASUALTY INSURANCE COMPANY pursuant to the laws of the State of Florida, particularly under the Florida Business Corporation Act, chapter 607 of the Florida Statutes and the Florida Insurance Code, hereby adopts the following Articles of Incorporation:

ARTICLE I. NAME

The name of the corporation shall be US COASTAL PROPERTY & CASUALTY INSURANCE COMPANY (hereinafter "Corporation").

ARTICLE II. PURPOSE

The purpose for which the Corporation is organized is to engage in the business of Property & Casualty insurance, and such business pertaining thereto, permitted under the laws of the United States and of the State of Florida.

ARTICLE III. PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office of the Corporation is located at 301 NW 138th Terrace, Jonesville, Alachua County, Florida 32669-2794, or at a location subsequently designated by the Board of Directors. The mailing address of the Corporation is 301 NW 138th Terrace, Jonesville, Alachua County, Florida 32669-2794, or at an address subsequently designated by the Board of Directors.

ARTICLE IV. TERM OF EXISTENCE

The Corporation shall have perpetual existence.

ARTICLE V. SHARES OF COMMON STOCK

The Corporation is authorized to issue two million two hundred fifty thousand (2,250,000) shares of common stock, having a par value of one dollar (\$1.00) per share.

ARTICLE VI. SHAREHOLDER ACTION

Except as otherwise required by the Florida Business Corporation Act, chapter 607 of the Florida Statutes, an affirmative vote of greater than fifty percent (50%) of the shares of common stock of the Corporation shall be required for any shareholder action.

ARTICLE VII. BOARD OF DIRECTORS

There shall initially be five (5) members of the Board of Directors, who shall serve until the first meeting of the shareholders of the Corporation to occur not more than one (1) year from the date of incorporation. The initial members of the Board of Directors are as follows:

NAME	ADDRESS
Michael L. McNitt	301 NW 138th Terrace
Chairman	Jonesville, Florida 32669-2794
Roger L. McNitt	301 NW 138th Terrace
Director	Jonesville, Florida 32669-2794
Ronda L. Loshonkohl	301 NW 138th Terrace
Director	Jonesville, Florida 32669-2794
Jeffrey R. Hershman	301 NW 138th Terrace
Director	Jonesville, Florida 32669-2794
John D. Lockhart	301 NW 138th Terrace
Director	Jonesville, Florida 32669-2794

Thereafter, the number of directors of the Corporation may be fixed in accordance with the Bylaws of the Corporation, but shall in no event be less than one (1).

ARTICLE VIII. REGISTERED OFFICE AND AGENT

The registered office and registered agent of the Corporation shall be the Florida Chief Financial Officer, Florida Department of Financial Services, Division of Legal Services, Service of Process Section, 200 E. Gaines Street, Tallahassee, Florida 32399-4201, as required by the laws of the State of Florida.

ARTICLE IX. INCORPORATORS

The name and address of the Incorporators of the Corporation, none of whom is less than eighteen (18) years old and all of whom are citizens of the United States, are as follows:

NAME

ADDRESS

Michael L. McNitt

301 NW 138th Terrace Jonesville, Florida 32669-2794 John D. Lockhart

301 NW 138th Terrace

Jonesville, Florida 32669-2794

Mohammad S. Sherif

301 NW 138th Terrace

Jonesville, Florida 32669-2794

Julia W. Knight

301 NW 138th Terrace

Jonesville, Florida 32669-2794

Ronda L. Loshonkohl

301 NW 138th Terrace

Jonesville, Florida 32669-2794

We 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 section 817.155 of the Florida Statutes.

Date

Incorporator

STATE OF FLORIDA **COUNTY OF ALACHUA**

Before me, a Notary Public, on this day personally appeared Michael L. McNitt, known to me to be the person whose name is subscribed to the foregoing document or having produced-

as identification, who acknowledged that she executed

this document freely and voluntarily.

My Commission Expires: May a . 201

Seal:



Ċ

John D. Lockhart Incorporator		, , , , , , , , , , , , , , , , , , ,
STATE OF FLORIDA COUNTY OF ALACHUA		
		oduced
this document freely and voluntarily.	_	
	MY COM	S: May al, aolo LEY K JACKSON MISSION # EE200396 RES May 21, 2016 tatatotaryCordon com
Mohammad S. Sherif Incorporator		STATION OF THE PERSON OF THE P
STATE OF FLORIDA COUNTY OF ALACHUA		SIME SIME 6: 11
Before me, a Notary Public, on this day perso to be the person whose name is subscribed to as i		ng produced

Notary Public

My Commission Expires: May al,

Seal:

this document freely and voluntarily.

Incorporator STATE OF FLORIDA COUNTY OF ALACHUA Before me, a Notary Public, on this day personally appeared Ronda L. Loshonkohl, known to me to be the person whose name is subscribed to the foregoing document or having produced as identification, who acknowledged that she executed this document freely and voluntarily. Notary Public My Commission Expires: V Seal: **EXPIRES May 21, 2016** Florida Notary Borvice corp Incorporator STATE OF FLORIDA **COUNTY OF ALACHUA** Before me, a Notary Public, on this day personally appeared Julia W. Knight, known to me to be the person whose name is subscribed to the foregoing document or having produced as identification, who acknowledged that she executed this document freely and voluntarily. My Commission Expires Seal: