

P/6000077522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

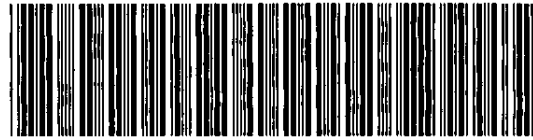
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300290360653

09/21/16--01003--021 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 SEP 21 AM 11:30

09/22/16

COVER LETTER

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

SUBJECT: O'Neill Marketing 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: Donna Henry

Name (Printed or typed)

7971 SE Hempstead Circle

Address

Hobe Sound, FL 33455

City, State & Zip

772-486-0222

Daytime Telephone number

dhenry@regionshg.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: O'Neill Marketing Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
14310 N. Dale Mabry Highway

Suite #100

Tampa, FL 33618

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Health & Life Insurance Sales and Marketing

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 SEP 21 AM 11:30

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Charles T. O'Neill, President

Address 13719 Chestersall Dr.
Tampa, FL 33624

Name and Title: Jonathan W. Stocks, Secretary

Address: 7971 SE Hempstead Circle
Hobe Sound, FL 33455

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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: Francis J. Henry
Address: 7971 SE Hempstead Circle
Hobe Sound, FL 33455

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 SEP 21 AM 11:30

ARTICLE VII INCORPORATOR

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

Name: Donna Henry
Address: 7971 SE Hempstead Circle
Hobe Sound, FL 33455


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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.

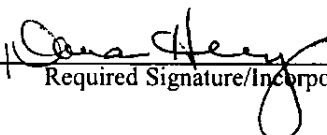
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

09/19/2016

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

09/16/2016

Date