

**Electronic Articles of Incorporation  
For**

P17000039750  
FILED  
May 02, 2017  
Sec. Of State  
tscott

STORY INSURANCE SERVICES, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

**Article I**

The name of the corporation is:

STORY INSURANCE SERVICES, INC.

**Article II**

The principal place of business address:

224 WEST NEWELL STREET  
WINTER GARDEN, FL. US 34787

The mailing address of the corporation is:

224 WEST NEWELL STREET  
WINTER GARDEN, FL. US 34787

**Article III**

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The number of shares the corporation is authorized to issue is:

1000

**Article V**

The name and Florida street address of the registered agent is:

SUSAN STORY  
224 WEST NEWELL STREET  
WINTER GARDEN, FL. 34787

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: SUSAN STORY

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## **Article VI**

The name and address of the incorporator is:

SUSAN STORY

224 WEST NEWELL STREET  
WINTER GARDEN, FL 34787

Electronic Signature of Incorporator: SUSAN STORY

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

## **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P  
SUSAN STORY  
224 WEST NEWELL STREET  
WINTER GARDEN, FL. 34787 US

## **Article VIII**

The effective date for this corporation shall be:

05/01/2017