12/28/2015

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000366288 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LEGALING CORPORATE SERVICES INC.

Account Number : I20180000011

Phone

: (844)386-0178

Fax Number

: (214)317-4754

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

mail	Address:					
------	----------	--	--	--	--	--

# FLORIDA PROFIT/NON PROFIT CORPORATION

Felix Hernandez Insurance Inc.

Certificate of Status	0
Certified Copy	1
Page Count	03

https://efile.sund.z.org/scripts/efilodyriexe

1/2

To: 18506176381 From: 14693173436 Date: 12/28/18 Time: 11:44 AM Page: 02/05

13/28/2016 Dysion of Corporations

| Estimated Charge | \$78.75 |

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.suno-z.org/scripts/efile.ovi.exe

2/2

# ARTICLES OF INCORPORATION OF

(((H18000366288 3)))

# FELIX HERNANDEZ INSURANCE, INC.

The undersigned hereby forms a Corporation under the following charter of Articles of incorporation:

## ARTICLE I

The name of this Corporation shall be:

# FELIX HERNANDEZ INSURANCE, INC.

# **ARTICLE II**

The principal place of business/mailing address is:

3864 FLORIDA BLVD PALM BEACH GARDENS, FL 33410

#### **ARTICLE III**

This Corporation is organized for the purpose of transacting any or all-lawful business.

### ARTICLE IV

This corporation is authorized to issue one hundred shares of one-dollar (1.00) par common stock.

#### ARTICLE V

This Corporation shall have one (1) director initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial directors of this Corporation are:

FELIX HERNANDEZ CEDENO 3864 FLORIDA BLVD PALM BEACH GARDENS, FL 33410

(((H18000366288 3)))

To: 18506176381 From: 14693173436 Date: 12/28/18 Time: 11:44 AM Page: 04/05

(((H18000366288 3)))

# ARTICLE VI

The name and address of the initial registered agent of this corporation is:

FELIX HERNANDEZ CEDENO 3864 FLORIDA BLVD PALM BEACH GARDENS, FL 33410

# ARTICLE VII

The name and address of the incorporator of this corporation is:

FELIX HERNANDEZ CEDENO 3864 FLORIDA BLVD PALM BEACH GARDENS, FL 33410

# **ARTICLE VIII**

The start of the Incorporation will be:

January 1, 2019

FEER HERNANDEZ CEDENO /PRESIDENT

> 72.24.18 DATE

> > (((H18000366288 3)))

To: 18506176381 From: 14693173436 Date: 12/28/18 Time: 11:44 AM Page: 05/05

#### CERTIFICATE OF DESIGNATION

(((H18000366288 3)))

#### REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501. Florida Statutes, the undersigned Corporation, organized under the laws of the state of Florida, submits in the state of Florida.

1. The name of the Corporation is:

# FELIX HERNANDEZ INSURANCE, INC.

The name and address of the registered agent and office is:

FELIX HERNANDEZ CEDENO 3864 FLORIDA BLVD PALM BEACH GARDENS, FL 33410

Having been named as registered agent and to accept service of process for the above stated Corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

FELIX HERNANDEZ CEDENO /PRESIDENT

DATE