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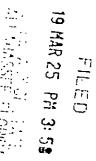
(Re	questor's Name)			
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M SIMMONS MAR 25 2019

COVER LETTER

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

SUBJECT:	Insuranc	ce Innovations of Brevard, Inc.		
_		(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	<u>ÜDE SÜFFIX</u>)
Enclosed are	an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
₩ \$7 Filing		□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
			Abbitronab et	
19828	Inst	urance Innovations of Brevard, Inc.		
FRO	M:	Nam	e (Printed or typed)	<u>.</u>
	214	Surf Road		
			Address	
	Mel	bourne Beach, FL 32951		
			, State & Zip	
	221	-305-2554	•	
			Felephone number	
	leisss	adkeow(ægmail.com	relephone name.	
		•	ed for future annual report i	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 1 NAME The name of the corpora	Insurance Innovations of Brevtion shall be:	rard, Inc.	·
ARTICLE II PRINC	TPAL OFFICE Principal street address	Mailing address, if different is:	
214 Surf Road			
Melbourne Beach, FL	32951		
ARTICLE III PURPO The purpose for which t	DSE Any and Al he corporation is organized is:	Il Lawful Purposes.	
ARTICLE IV SHAR The number of shares of	<u>ES</u> stock is:/ <i>OO</i>		
	L OFFICERS AND/OR DIRECTORS		19 H
Name and Title	Kimberly Adkinson-Cowles, President	Name and Title:	HAR 2
Address	214 Surf Road	Address:	
	Melbourne Beach, F1, 32951	_	
			5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
Name and Title:		Name and Title:	
Address		Address:	
		<u> </u>	
Name and Title:		_ Name and Title:	
Address			
•			

Name a	and Title:		
Addre	ss	Address:	
			-
ARTICLE VI	REGISTERED AGENT		
The <u>name and</u> Name:	Florida street address (P.O. Box NOT acceptable Kimberly Adkinson-Cowles	e) of the registered agent is:	
Address:	214 Surf Road		
riddiess.	Melbourne Beach, FL 32951		
OTTE E VII	INCADDAD (TAD		
	INCORPORATOR		
The name and a	address of the Incorporator is:		
Name:	Kimberly Adkinson-Cowles		
Address:	214 Surf Road	<u></u>	
	Melbourne Beach, FL 32951		
Effective date, i	EFFECTIVE DATE: If other than the date of filing: date is listed, the date must be specific and car		
	te inserted in this block does not meet the applical effective date on the Department of State's record		nts, this date will not be listed as
	amed as registered agent to accept service of proc I am familiar with and accept the appointment as		
سر شغر			03/18/2019
	Required Signature/Registered Agent		Date
	ocument and affirm that the facts stated herein a Department of State constitutes a third degree fe		
بيرسن بمعين			03/18/2019

Date

Required Signature/Incorporator

Kimberly Adkinson-Cowles

214 Surf Road Melbourne Beach, FL 32951 321-305-2554

kimadkcow@gmail.com

March 18, 2019

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Document Number P17000067037

Insurance Innovations of Brevard, Inc.

Dear Sir or Madam:

The above referenced LLC has been administratively dissolved and I am sending this letter as an affidavit that I will not attempt to reinstate it. Instead, I am attaching the Articles of Incorporation for a new Corporation that has the same name, along with the required \$70 fee.

Sincerely,

Kimberly Adkinson-Cowles