

**Electronic Articles of Incorporation
For**

P19000071889
FILED
September 11, 2019
Sec. Of State
dlokeefe

CHOICE INSURANCE ADVISORS, 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:

CHOICE INSURANCE ADVISORS, INC.

Article II

The principal place of business address:

5333 NW ALAM CIRCLE
PORT SAINT LUCIE, FL. US 34986

The mailing address of the corporation is:

5333 NW ALAM CIRCLE
PORT SAINT LUCIE, FL. US 34986

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:

500

Article V

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

SAMUEL R COVINGTON
5333 NW ALAM CIRCLE
PORT SAINT LUCIE, FL. 34986

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

Registered Agent Signature: SAMUEL R COVINGTON

Article VI

The name and address of the incorporator is:

SAMUEL R COVINGTON
5333 NW ALAM CIRCLE

PORT SAINT LUCIE FL 34986

Electronic Signature of Incorporator: SAMUEL R COVINGTON

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
SAMUEL R COVINGTON
5333 NW ALAM CIRCLE
PORT SAINT LUCIE, FL. 34986 US

Article VIII

The effective date for this corporation shall be:

09/11/2019