

195000016665

TRANSMITTAL LETTER

FILED
FEB 27 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

500001417885
-03/01/95--01009--001
***131.25 ***131.25

SUBJECT: BENNETT INSURANCE GROUP, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: T. Michael Bennett
Name (printed or typed)
5246 Tamiami Ct.
Address
Cape Coral, FL 33904
City, State & Zip
813/540-1103
Daytime Telephone number

3-1-95
(12)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

BENNETT INSURANCE GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5246 Tamiami Ct.
Cape Coral, FL 33904

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 (One Thousand) Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

T. Michael Bennett
5246 Tamiami Ct.
Cape Coral, FL 33904

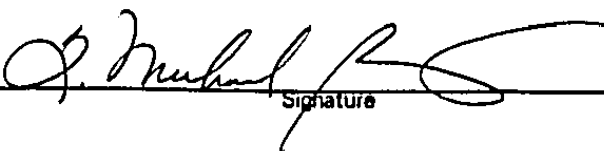
ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

T. Michael Bennett
5246 Tamiami Ct.
Cape Coral, FL 33904

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

24 day of February, 1995.



Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

FEB 27 1995
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

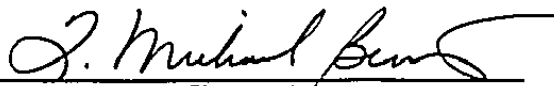
PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: BENNETT INSURANCE GROUP, INC.

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

T. Michael Bennett
(Name)
5246 Tamiami Ct.
(P.O. Box ~~not~~ acceptable)
Cape Coral, FL 33904
(City/State/Zip)

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.


(Signature)

2/24/95
(Date)

P95000016665

BENNETT INSURANCE GROUP, INC.
D/B/A GREAT FLORIDA INSURANCE

OPERATING ACCOUNT
791 N. HARBOR CITY BLVD.
MELBOURNE, FL 32903
PH. 407-254-6015

1278

PAY
TO THE
ORDER OF

Director of Corporations Dept of State
Thompson and Co

10 06 \$

03-243/070
197

\$ 35.00

DOLLARS

NationsBank

NationsBank of Florida, N.A.
Cape Coral, Florida 33914

FOR

Pay Reg. Agents

⑈001278⑈ ⑆067002436⑆ 3603477049⑈

700001982717

-06/27/96--01058--017

*****35.00 *****35.00

PAID

August 15, 1996

Division of Corporations
Post Office Box 13900
Tallahassee, Florida 32317

Old Agent

Dear Sirs:

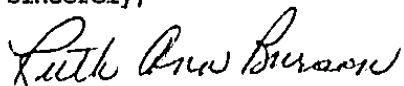
T.M. Bennett, 5246 Tami Court, Cape Coral, FL
33904

Please be advised that the registered agent for the Bennett Insurance Group, Inc., EIN 65-0563817, has been changed. The new registered agent and her address is as follows:

Ruth Ann Burson
1155 Hollowbrook Lane
Malabar, FL 32950

Enclosed is a check in the amount of \$35.00 to cover the cost of this change.

Sincerely,



Ruth Ann Burson, President
Bennett Insurance Group, Inc.
1155 Hollowbrook Lane
Malabar, Florida 32950

Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office and registered agent in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.



Ruth Ann Burson, President