

TRANSMITTAL LETTER

P960000041934

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

SHIRLEY L. BARNETT
01/12/05-00007-000
***131.25 ***131.25

SUBJECT: SHIRMAN INSURANCE AGENCY, 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

Additional Copy Required

FROM: WILLIAM C. SHIRMAN

Name (printed or typed)

7649 RICHLAND STREET

Address

WESLEY CHAPEL , FL. 33544

City, State & Zip

813-884-3931

Daytime Telephone number

FILED
55 JAN 12 11 27
TALLAHASSEE, FL
CLERK OF THE COURT

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

1-17-05

**CERTIFICATE OF DESIGNATION OF
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 THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: SIHERMAN INSURANCE AGENCY, INC.
2. The name and address of the registered agent and office is:

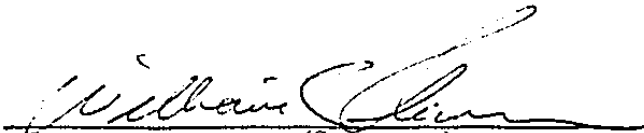
WILLIAM C. SIHERMAN
(NAME)

7649 RICHLAND STREET
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

WESLEY CHAPEL, FL. 33544
(CITY/STATE/ZIP)

FILED
JAN 12 11:30
TALLAHASSEE, FLORIDA

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)

JANUARY 10, 1996
(DATE)

ARTICLES OF INCORPORATION

FILED
96 JAN 12 11 11 AM '96
CLERK OF COURT
STATE OF 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: **SHERMAN INSURANCE AGENCY , INC.**

ARTICLE II PRINCIPAL OFFICE

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

**7649 RICHLAND STREET
WESLEY CHAPEL, FL. 33544**

ARTICLE III SHARES

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

is: *****7500 SHARES OF STOCK AT \$1.00*****
*****PAR-VALUE PER SHARE*****

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: **WILLIAM C. SHERMAN
7649 RICHLAND STREET
WESLEY CHAPEL , FL. 33544**

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

WILLIAM C. SHERMAN-----PRESIDENT

CAROL M. SHERMAN-----SECRETARY/TREASURER

7649 RICHLAND STREET
WESLEY CHAPEL, FL. 33544

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

10th day of JANUARY, 19 96

William C. Sherman
Signature

Carol M. Sherman
Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.