

P96000000 7161

TRANSMITTAL LETTER

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

SUBJECT: MARTIN & MARTIN 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:

JOHN C. MARTIN

Name (printed or typed)

4611 8th ST. CT. E.

Address

ELLENTON, FLA. 34222

City, State & Zip

1-941-729-0428

Daytime Telephone number

700001683087
-01/10/96--01005--002
****131.25 ****131.25

RMC
1-12-96

~~612~~

~~2096-986~~

96 JAN 22 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State

January 12, 1996

JOHN C. MARTIN
4611 8TH STREET CT E
ELLENTON, FL 34222

SUBJECT: MARTIN & MARTIN INSURANCE AGENCY, INC.
Ref. Number: W9600000986

We have received your document for MARTIN & MARTIN INSURANCE AGENCY, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6923.

Doris McDuffie
Corporate Specialist Supervisor

Letter Number: 496A00001643

ARTICLES OF INCORPORATION

FILED

96 JAN 22 PM 4:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be:

MARTIN & MARTIN INSURANCE AGENCY, INC.

ARTICLE II PRINCIPAL OFFICE

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

MARTIN & MARTIN INSURANCE AGENCY, INC.

4222 A, 26th ST. W.

BRADENTON, FLA. 34205

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 SHARES - IN THE FORM OF COMMON (NO-PAR VALUE STOCK) - 50 SHARES TO BE ISSUED TO

JOHN C. MARTIN AND 50 SHARES TO BE ISSUED TO PATSY M. MARTIN.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOHN C. MARTIN

4222 A, 26th ST. W.

BRADENTON, FLA. 34205

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):

JOHN C. MARTIN - WHO WILL OWN 50 SHARES OF THE 100 SHARES ISSUED OF THE
4611 8th ST. CT. E. COMMON STOCK
ELLENTON, FLA. 34222

PATSY M. MARTIN - WHO WILL OWN 50 SHARES OF THE 100 SHARES ISSUED OF THE
4611 8th ST. CT. E. COMMON STOCK
ELLENTON, FLA. 34222

THE CORPORATION WILL BE OWNED AND MANAGED BY JOHN C. MARTIN AND PATSY M. MARTIN
AND THE TWO SHALL MAINTAIN AND WORK WITH THE CORPORATION (BUSINESS) TO INSURE
ITS GROWTH NOW AND IN THE FUTURE.

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

6th day of JANUARY, 19 96.



Signature



Signature

Signature

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

FOR: MARTIN & MARTIN INSURANCE AGENCY, INC.
4222 A , 25th St. W.
BRADENTON, FLA. 34205

PURPOSES FOR THE CORP. TO ENGAGE IN THE BUSINESS OF SOLICITING FOR AND
SELLING PROPERTY, CASUALTY, LIFE, HEALTH INSURANCE AND TO RECEIVE IN
PAYMENT FOR THIS A COMMISSION FROM THE PROPER INSURERS (WHOM SHALL HAVE
HIRED US FOR THIS PURPOSE, AND THEY SHALL BE DUALY LICENSED ^{IN} THE STATE OF FLA.
WE, THE TWO OWNERS OF THE CORP., PATSY M. MARTIN AND JOHN C. MARTIN, HOLD A
FLA. 220 , CASUALTY & PROPERTY, HEALTH & LIFE INS. LICENSE REQUIRED FOR THIS TYPE OF
BUSINESS. WE HAVE AND SHALL HAVE A PROPER OFFICE THAT IS HIGHLY ACCESSIBLE TO
THE PUBLIC. THE FOREGOING PURPOSES AND ACTIVITIES WILL BE INTERPRETED AS
EXAMPLES ONLY AND NOT AS LIMITATIONS, AND NOTHING THEREIN SHALL BE DEEMED AS
PROHIBITTING THE CORPORATION FROM EXTENDING ITS ACTIVITIES TO ANY RELATED OR
OTHERWISE PERMISSIBLE LAWFUL BUSINESS PURPOSES, WHICH BECOME NECESSARY, PROFITABLE
OR DESIRABLE FOR THE FUTHERANCE OF THE CORPORATE OBJECTIVES EXPRESSED ABOVE.

SIGNED

Patsy M. Martin
PATSY M. MARTIN

John C. Martin
JOHN C. MARTIN

FLORIDA DEPARTMENT OF INSURANCE

PATSY MONTELL MARTIN
Lic.# 205884922



IS LICENSED TO TRANSACT THE
FOLLOWING CLASSES OF INSURANCE:
Gen. Lines (Prop. & Cas. Ins.)
Life & Variable Annuity
Life & Health

Patsy M. Martin
SIGNATURE

FLORIDA DEPARTMENT OF INSURANCE

JOHN CARL MARTIN
Lic.# 527501144



IS LICENSED TO TRANSACT THE
FOLLOWING CLASSES OF INSURANCE:
Gen. Lines (Prop. & Cas. Ins.)

John C. Martin
SIGNATURE

**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: MARTIN & MARTIN INSURANCE AGENCY, INC.

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

JOHN C. MARTIN

(NAME)


4222 A, 26th ST. W.

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

BRADENTON, FLA. 34205

(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)

1/6/96
(DATE)