

# P96000025258

## TRANSMITTAL LETTER

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

SUBJECT: Turner & Associates Insurance, Inc.  
(Proposed corporate name - must include suffix)

000001748710  
-03/19/96--01042--003  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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:

Garry Turner

Name (printed or typed)

13350 W. Colonial Dr. Ste 310

Address

Winter Garden FL 34787

City, State & Zip

407 292-7277

Daytime Telephone number

SEAL MAY 19 1996  
TALLAHASSEE FLORIDA

96 MAR 18 PM 2:10

FILED

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

GB 3/21/96

## ARTICLES OF INCORPORATION

96 MAR 18 PM 2:10

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:

Turner & Associates Insurance, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

13350 W. Colonial Drive Ste. 310  
Winter Garden, FL 34787

### ARTICLE III SHARES

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

100

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Garry M. Turner  
13350 W. Colonial Drive Ste 310  
Winter Garden, FL 34787

**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):

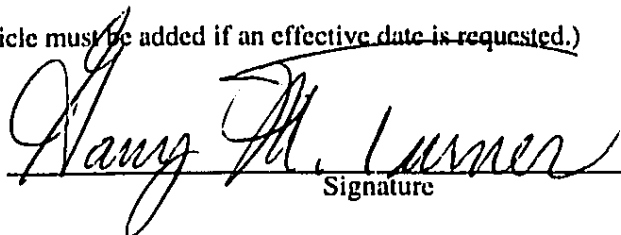
Garry M. Turner - President  
13350 W. Colonial Dr. Ste. 310  
Winter Garden, FL 34787

Venus Turner - Sec/Treasurer  
13350 W. Colonial Dr. Ste 310  
Winter Garden, FL 34787

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

\_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_\_.

(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

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

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

96 MAR 10 PM 2:10

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:

Turner & Associates Insurance, Inc.

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

Garry Turner  
(NAME)

13350 W. Colonial Drive Ste. 310  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Winter Garden FL 34787  
(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.*

Garry Turner  
(SIGNATURE)

2-29-96  
(DATE)