

P96000047211

TRANSMITTAL LETTER

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

SUBJECT: Quick Claims, 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:

Quick Claims  
Name (printed or typed)

11223 Physicians Drive  
Address

Tallahassee, Florida 32308  
City, State & Zip

(904) 668-6400  
Daytime Telephone number

65 JAN 4 PM 2:42

FILED

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

SAS  
6/4/96

## ARTICLES OF INCORPORATION

FILED  
03 JAN 4 2012

*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:

Quick Claims, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

Quick Claims, Inc.  
1625 Physicians Drive  
Tallahassee, FL 32308

### ARTICLE III SHARES

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

50 shares

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Melanie Britt  
1625 Physicians Drive  
Tallahassee, FL 32308

**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):

Melanie Britt

1625 Physicians Drive  
Tallahassee, FL 32308

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

4 day of June, 1996.

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

Melanie Britt

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**

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: Quick Movers, Inc
2. The name and address of the registered agent and office is:

Mahnie Britt  
(NAME)  
1125 Physicians Drive  
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)  
Tallahassee, FL 32308  
(CITY/STATE/ZIP)

FILED  
65 JUL 4 1996  
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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.

Mahnie Britt  
(SIGNATURE)

6/4/96  
(DATE)