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TRANSMITTAL LETTER
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96 SEP 30 PM 12:02

DIVISION OF CORPORATION

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

200001959842
-09/30/96--01042--010
****390.00 ****131.25

SUBJECT: Five Stars 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:

Marten Daniel
Name (printed or typed)

1040 E 57 St
Address

Hialeah FL 33013
City, State & Zip

(305) 688-9255
Daytime Telephone number

FILED
96 SEP 30 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SEP 30 1996

will wait

ARTICLES OF INCORPORATION

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:

Five Stars Insurance Agency, Inc.

ARTICLE II PRINCIPAL OFFICE

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

5384 W. 16 AVE
Hialeah, FL 33012

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TALLAHASSEE, FLORIDA

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:

Marten Daniel
640 E 57th
Hialeah, FL 33013

See instructions for officers/directors

Odalis Rodriguez - President / Treasure
9856 NW 26 Ave
Miami FL 33142

Marten Daniel - Vice President / Secretary
640 E 51st
Maitland FL 32013

Julio C. Daniel Director/Officer
640 E 57 St
Hialeah, FL 33013

Julio Rodriguez Director / Officer
9856 NW 26 Ave
Miami FL 33142

30th day of September, 19 96.

Signature

Julis

Signature

Signature

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: Five Stars Insurance Agency, Inc.
2. The name and address of the registered agent and office is:

Marlen Daniel
(NAME)

1040 E 57 St
(P.O. Box or Mail Drop Box ~~NOT~~ ACCEPTABLE)

Tallahassee, FL 323013
(CITY/STATE/ZIP)

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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)

9/30/96
(DATE)