

# P97000003867

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

300002018803--U  
-12/03/96--01178--010  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: NATIONAL INSURANCE SERVICES, 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

xx \$ 78.75  
Filing fee and  
Certificate

     \$ 122.50  
Filing fee and  
Certified Copy

     \$ 131.25  
Filing fee,  
Certified Copy and  
Certificate

FROM:

KRISTI HURLEY

(Name - printed or typed)

12491 - 90 Avenue North

(Address)

Seminole, FL. 33772

(City, State and Zip Code)

(813) 345-3537

(Daytime Telephone Number)

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

*W96-25423*  
*NA*

97 JAN 14 PM 4:52  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

December 4, 1996

KRISTY HURLEY  
12491 90TH AVENUE NORTH  
SEMINOLE, FL 33772

SUBJECT: NATIONAL INSURANCE SERVICES, INC.  
Ref. Number: W96000025423

*You kept the  
original check  
of \$78.75*

We have received your document for NATIONAL INSURANCE SERVICES, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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) 487-6934.

Loria Poole  
Corporate Specialist

Letter Number: 896A00054488

## TRANSMITTAL LETTER

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

SUBJECT: Davis & Associates Senior Services, 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 and  
Certificate

\$ 122.50  
Filing fee and  
Certified Copy

\$ 131.25  
Filing fee,  
Certified Copy and  
Certificate

FROM:

Kristi Hurley  
(Name - printed or typed)

12491-90 Ave. No.  
(Address)

Seminole, FL. 33772  
(City, State and Zip Code)

813 345 3537  
(Daytime Telephone Number)

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

ARTICLES OF INCORPORATION  
OF  
DAVIS & ASSOCIATES SENIOR SERVICES, INC.

FILED  
97 JAN 14 PM 4:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned subscriber, a natural person competent to contract for the purpose of forming a corporation under the laws of the State of Florida, adopts the following Articles of Incorporation for such corporation.

ARTICLE I

The name of this corporation is DAVIS & ASSOCIATES SENIOR SERVICES, INC.

ARTICLE II

The corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE III

This corporation is authorized to issue 1000 shares of (\$1.00) par value common stock.

ARTICLE IV

This corporation shall have perpetual existence, unless dissolved in a manner provided by law.

ARTICLE V

The street address of the initial registered office of this corporation is 12491 90 Avenue North, Seminole, Fl. 33772 and the name of the initial registered agent of this corporation at that address is Kristi A. Hurley and the principal office address of the corporation shall be 12491 - 90 Avenue North, Seminole, Florida 33772.

#### ARTICLE VI

This corporation shall have one director initially. The number of directors may be increased or diminished from time to time by the bylaws, but shall not be less than one nor more than five. The name and address of the initial director of this corporation is:

Kristi A. Hurley  
12491 - 90 Avenue North  
Seminole, FL. 33772

The directors of this corporation are subject to the provisions of the certificate of incorporation, bylaws of the corporation, and the laws of the State of Florida, shall hold office for the first year of the corporation's existence or until their successor is elected and have qualified.

#### ARTICLE VII

The name and address of the original subscriber and incorporator is:

Kristi A. Hurley. 12491 - 90 Avenue North, Seminole, Florida 33772.

#### ARTICLE VIII

In pursuance of Chapter 48.01 Florida Statutes, the following is submitted in compliance with said Act:

That DAVIS & ASSOCIATES SENIOR SERVICES, INC. desiring to organize under the laws of the State of Florida, with its registered office as indicated in these Articles of Incorporation, in the City of Seminole, County of Pinellas, State of Florida, has named Kristi A. Hurley, 12491 - 90 Avenue North, Seminole, Florida 33772 as its registered agent to accept service of process with this State.

A. The corporation shall have a lien on all shares of stock for any sum or amount due by the holder thereof to the corporation. No transfer of shares of stock will be valid or binding until all debts due by the stockholder to the corporation shall have been fully paid and until the transfer has been duly entered upon the books of the corporation.

B. The power to make or change the bylaws of and for the corporation shall be vested solely in the holders of the common stock and it shall take action by holders of all of the stock issued and outstanding to change them.

C. This corporation shall begin corporate existence on the date of filing of the Articles of Incorporation with the Secretary of State.

IN WITNESS WHEREOF, I the undersigned subscribing incorporator, has hereunto set his hand and seal this 7 day of January, 1999, for the purpose of forming this corporation under the laws of the State of Florida, and I hereby make and file in the office of the Secretary of State in the State of Florida these Articles of Incorporation and certify that the facts herein stated are true.

Kristi A. Hurley  
Kristi A. Hurley

STATE OF FLORIDA     )  
                              ) SS.  
COUNTY OF PINELLAS )

The foregoing instrument was acknowledged before me this  
1 day of January, 1999, by Kristi Hurley who is  
personally known to me or who has produced \_\_\_\_\_ as  
identification and who did (did not) take an oath.

Donna Tarleton  
Notary Public  
Donna Tarleton  
Printed or typed name of Notary

My commission expires:



DONNA TARLETON  
COMMISSION # CC 324158  
EXPIRES OCT 17, 1997  
Bonded Through  
ALAN INSURANCE SERVICES

REGISTERED AGENT ACKNOWLEDGMENT

Having been named Registered Agent of the above-stated  
corporation, at the place designated in these Articles of  
Incorporation, I hereby accept to act in that capacity.

Kristi Hurley  
Kristi Hurley

**FILED**  
97 JAN 14 PM 4:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA