

P97000027724
TRANSMITTAL LETTER

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

000002112410--2
-03/13/97--01046--004
— Brian Patrick's Insurance ****131.25 ****131.25
Group Inc.

SUBJECT: _____

(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: PATRICK J. HOWARD
Name (Printed or typed)
8181 WHITE ROCK CIRCLE
Address
BOYNTON BEACH, FL. 33436
City, State & Zip
561-495-8787
Daytime Telephone number

FILED
97 MAR 26 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dmc
3/27/97

624

17
1097653

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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

March 19, 1997

PATRICK J. HOWARD
8181 WHITE ROCK CIRCLE
BOYNTON BEACH, FL 33435

SUBJECT: BRIAN PATRICK'S INSURANCE GROUP INC.
Ref. Number: W97000006353

We have received your document for BRIAN PATRICK'S INSURANCE GROUP INC. and check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your 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) 487-6878.

Terri Buckley
Corporate Specialist

Letter Number: 997A00013826

*Requested information
enclosed.*

Thank you

ARTICLES OF INCORPORATION

FILED
97 MAR 26 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: BRIAN PATRICK'S INSURANCE GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

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

14834 MILITARY TRAIL
DELRAY BEACH, FL 33484

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: BRIAN P. HOWARD
2746 LANTANA ROAD APT. 407
LANTANA, FL. 33462

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):

PATRICK J. HOWARD, PRESIDENT
8181 WHITE ROCK CIRCLE
BOYNTON BEACH FL. 33436

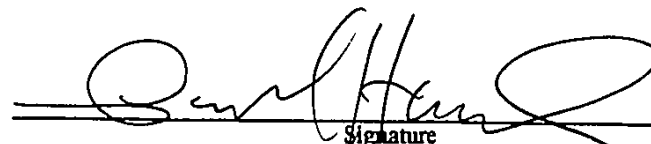
BRIAN P. HOWARD, VICE PRESIDENT
2746 LANTANA ROAD APT. 407
LANTANA, FL. 33462

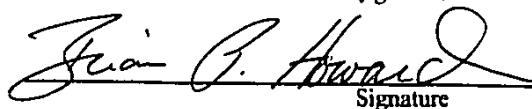
DEBORAH B. HOWARD, SECRETARY/TREASURER
8181 WHITE ROCK CIRCLE
BOYNTON BEACH, FL. 33436

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

20th day of February, 19 97.

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

 PATRICK J. HOWARD
Signature

 BRIAN P. HOWARD
Signature Vice President

 DEBORAH B. HOWARD
Signature Secretary/Treasurer

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**

FILED
97 MAR 26 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 BRIAN PATRICK'S INSURANCE GROUP, INC.

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

BRIAN P. HOWARD

(NAME)

2746 LANTANA ROAD APT. 407

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

LANTANA, FL. 33462

(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.

Brian P. Howard
(SIGNATURE)

2.20.97
(DATE)