

P97000029220

TRANSMITTAL LETTER

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

SUBJECT: PLAN B INSURANCE INC.
(Proposed corporate name - must include suffix)

600002128166--6
-03/31/97--01034--003
****122.50 ****122.50

Enclosed is an original and one (1) copy of the articles of incorporation and a check
for :

☐ \$70.00 ☐ \$78.75 ☒ \$122.50 ☐ \$131.25

FROM: Mary T. King
Name (printed or typed)
702 Bond Way
Address
Delray Beach, FL. 33483
City, State & Zip
561-274-4155
Daytime Telephone number

FILED
97 MAR 31 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 11 1997 : BSB

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

FILED

ARTICLES OF INCORPORATION 97 MAR 31 AM 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OF

PLAN B INSURANCE INC.

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: PLAN B INSURANCE INC.

ARTICLE II PRINCIPAL OFFICE

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

702 Bond Way
Delray Beach, FL. 33483

ARTICLE III SHARES

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

50

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Mary T. King
702 Bond Way
Delray Beach, FL. 33483

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

President- Mary T. King, 702 Bond Way, Delray Beach, Fl. 33483

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

25th day of March, 1997.

Mary T. King 1 President
Signature

Signature

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: PLAN B INSURANCE INC.

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

Mary T. King

(Name)

702 Bond Way

(P.O. Box not acceptable)

Delray Beach, FL. 33483

(City/State/Zip)

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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.


(Signature)

03/25/97