# PATALONADESTER DESTRUCTION DE SE DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTION

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

SUBJECT:	INSURANCE OPTIONS PLUS OF LEON COUNTY, INC.  (Proposed corporate name - must include suffix)					
SUMMET.						
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S70.00 Filing Fee		i one(1) copy of the articles  \$78.75  Filing Fee  & Certificate	Sor incorporation and a second	S \$131.25 Filing Fee, Certified Copy & Certificate		
			ADDITIONAL CO	DPY REQUIRED		
F	ROM:		Register rinted or typed)	SECKET TALL AHA	97 OCT 2	
		1535 N. Maitland Ave.  Address  FLORI			FILED 97 OCT 20 AN 9:58	
	_	Maitland, FL 32751			58	
3m2 19	1 <sup>-</sup>		260-2220 Telephone number	<del></del>		

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

# ARTICLES OF INCORPORATION

FILED 97 OCT 20 AH 9: 58

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECRETARY OF STATE TALLAHASSEE. FLORIDA

## ARTICLE I

The name of the corporation shall be:

INSURANCE OPTIONS PLUS OF LEON COUNTY, INC.

### ARTICLE II PRINCIPAL OFFICE

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

737 N. Monroe Street Tallahassee, FL 32303

### ARTICLE III SHARES

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

500 common

500 preferred

### INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and Florida street address of the initial registered agent are:

Lloyd Register 1535 N. Maitland Avenue Maitland, FL 32751

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

LR3 Enterprises, Inc. 1535 N. Maitland Avenue Maitland, FL 32751

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

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 dutles, and I am familiar with and accept the obligations of my position as registered agent

Signitule/Registered Agent