

TRANSMITTAL LETTER

P97000093109

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

600002332036--3  
-10/29/97--01005--003  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: SOUTH EASTERN CLAIMS & INFORMATION 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  
& Certificate

☐ \$122.50

Filing Fee  
& Certified Copy

☐ \$131.25

Filing Fee,  
Certified Copy  
& Certificate

Please return the photocopy to me with the filing date stamped on it.

FROM:

DARLENE COUCH

Name (printed or typed)

P.O. Box 948361

Address

MAITLAND FL 32751

City, State & Zip

407) 660-1125

Daytime Telephone Number

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 OCT 29 AM 8:24

RP  
10-30-97

# **ARTICLES OF INCORPORATION OF SOUTH EASTERN CLAIMS AND INFORMATION SERVICES, INCORPORATED**

The under signed, for the purpose of forming a corporation under the laws of the State of Florida, hereby adopt the following Articles of Incorporation.

## **ARTICLE I: NAME**

The name of this corporation shall be: SOUTH EASTERN CLAIMS AND INFORMATION SERVICES, INC..

## **ARTICLE II: DURATION OF BUSINESS**

The term of existence shall begin \_\_\_\_\_ and shall be perpetual.

## **ARTICLE III: NATURE OF BUSINESS**

The corporation is organized for the purpose of engaging in any activities of business permitted under the laws of the United States and the State of Florida.

In order to properly pursue the objects and purposes set forth above, the corporation shall have full power and authority to purchase, lease and otherwise acquire, hold, mortgage, convey and otherwise dispose of all kinds of property, both real and personal, necessary for carrying on any activities or business permitted under the laws of the United States and the State of Florida.

## **ARTICLE IV: CAPITAL STOCK**

The maximum number of shares of stock that the corporation is authorized to have outstanding at any time shall be one thousand (1,000) shares of common stock. Such shares shall be single class, and shall have a par value of One Dollar (\$1.00) per share.

## **ARTICLE V: ADDRESS**

The principal office of this corporation shall be located at 2013 Grand Brook Circle, #822-B, City of Orlando, County of Orange, State of Florida 32810. The post office address of said office of the corporation shall be Post Office Box 948361, City of Maitland, County of Orange, State of Florida 32751.

## **ARTICLE VI: REGISTERED AGENT**

The name of the Registered Agent of the South Eastern Claims and Information Services, Inc. is George Mansfield. The street address of the Registered Office is 2013 Grand Brook Circle, #822-B, Orlando, Florida 32810.

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## **ARTICLE VII: DIRECTORS**

The corporation shall have two (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and post office addresses of the members of the first Board of Directors shall hold office the first year of the corporation's existence or until their successor are elected and have qualified are as follows:

<u>NAME</u>	<u>ADDRESS</u>
Darlene Couch	2013 Grand Brook Circle #822-B, Orlando, Florida 32810
George Mansfield	3511 S. Park Avenue Sanford, Florida 32773

## **ARTICLE VIII: OFFICERS**

The Officers of the corporation shall be President, Vice-President/Secretary and Treasure, and shall be chosen by the Board of Directors. The Board of Directors may also, from time to time, provide for and elect all other officers or committees which may seem expedient to the Board.

## **ARTICLE IX: INCORPORATORS**

The names and street addresses of the Incorporators of this corporation are as follows:

<u>NAME</u>	<u>ADDRESS</u>
Darlene Couch	2013 Grand Brook Circle #822-B, Orlando, Florida 32810
George Mansfield	3511 S. Park Avenue Sanford, Florida 32773

## **ARTICLE X: SEAL**

The seal of the corporation shall be circular with the name South Eastern Claims And Information Services, Inc. around the border and "Florida Seal, 1997" in the center.

## **ARTICLE XI: AMENDMENT**

This corporation reserves the right to amend, alter, change or repeal any provision contained herein in the manner now or hereafter prescribed by law, and all rights conferred on stockholders herein are granted subject to reservation.

**CERTIFICATE AND ACKNOWLEDGMENT  
OF REGISTERED AGENT**

*CERTIFICATE OF REGISTERED AGENT*

*OF*

**SOUTH EASTERN CLAIMS AND INFORMATION SERVICES, INC.**

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at **2013 Grand Brook Circle #822-B, Orlando, Florida 32810**, has named **George Mansfield** located at the aforesaid address, as its Registered Agent to accept service of process within this state.

**ACKNOWLEDGMENT**

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

  
George Mansfield

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IN WITNESS THEREOF, the undersigned, as the incorporators of the above named corporation, does hereby subscribe, acknowledge and file in the office of the Secretary of State for the State of Florida this 10<sup>th</sup> day of JUNE, 1997.

  
George Mansfield

**STATE OF FLORIDA  
COUNTY OF ORANGE**

**BEFORE ME**, personally appeared **George Mansfield**, the person described in and who executed the forgoing Articles of Incorporation for the South Eastern Claims And Information Services, Inc., and who acknowledged to and before me that he executed said instrument for the purpose therein expressed.

**WITNESS** my hand and official seal, this the 10<sup>th</sup> day of JUNE, 1997, in the aforesaid county and state.

  
NOTARY PUBLIC  
My commission expires:

