

TRANSMITTAL LETTER

P98000003556

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

SUBJECT: Frank MacFarlane Insurance, Inc.  
(Proposed corporate name - must include suffix)

200002397022--9  
-01/12/98--01083--011  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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: FRANK MacFarlane  
Name (Printed or typed)

7218 KNOTTY PINE Ave.  
Address

Winter Park, FL 32792  
City, State & Zip

407-671-1441  
Daytime Telephone number

FILED  
98 JAN 12 PM 12:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

CB  
1-13-98

## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be:

FRANK MacFarlane Insurance, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

7218 KNOTTY PINE Ave.  
Winter Park, FL. 32792

### ARTICLE III SHARES

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

500

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Frank MacFarlane  
7218 KNOTTY PINE Ave.  
Winter Park, FL. 32792

### ARTICLE V INCORPORATOR

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

ARNELL MacFarlane  
7218 KNOTTY PINE Ave.  
Winter Park, FL. 32792

Arnell MacFarlane

Signature/Incorporator

1-6-98

Date

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

Frank MacFarlane

Signature/Registered Agent

1-6-97

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA