

P98080053799

TRANSMITTAL LETTER

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JUN 15 PM 1:49

SUBJECT: Florida Restaurant Insurance Service, Inc.
(Proposed corporate name - must include suffix)

900002559579--5
-06/15/98--01058--005
*****70.00 *****70.00

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:

Accounting & Tax Help, Inc.
Name (printed or typed)

8668 Park Blvd. Suite A
Address

Seminole, FL 33777
City, State & Zip

813-398-6011

Daytime Telephone number

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

6-16
6-16
105

-ARTICLES OF INCORPORATION

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

FLORIDA RESTAURANT INSURANCE SERVICE, INC.

ARTICLE II PRINCIPAL OFFICE

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

2005 PAN AM CIRCLE
SUITE 300
TAMPA, FL. 33607

ARTICLE III SHARES

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

1500 SHARES
NO PAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Accounting & Tax Help, INC.
8668 PARK BLVD Suite .A
SEMINOLE, Florida 33777

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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):

Paul A. Edgar
920 Monterey Point N.E.
St. Petersburg, FL. 33704

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

6th day of June, 19 98.

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

X Paul A. Edgar

Signature

Signature

Signature

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**

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:

FLORIDA RESTAURANT INSURANCE SERVICE, INC.

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

Accounting & Tax Help, INC.
(Name)

8668 PARK BLVD., Suite A
(P.O. Box not acceptable)

SEMINOLE, Florida 33777
(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.*

al Clark DATE 6-11-98
(Signature)
PRESIDENT

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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