# POSMITALETE 63/8

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

**SUBJECT:** 

Jamerican Insurance Agency, Inc.

(Proposed corporate name-must include suffix)

Enclosed is an original and <u>one (1) copy</u> of the articles of incorporation and a check or money order for:

COST \$78.75

Filing Fee & Certificate

400002567914-----06/22/98--01078--005 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

From:

Sandra Henry

Name

2655 Pine Tree Drive

Address

Miramar,FL 33023

City, State, & Zip

(305)989-0587

Daytime Telephone Number

98 JUN 22 AM 10: 29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TA-6/24/98

#### 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:

Jamerican Insurance Agency, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

2655 Pine Tree Drive Miramar,FL 33023

### ARTICLE III SHARES

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

The maximum number of shares that this corporation is authorized to have outstanding at any time is SEVEN THOUSAND FIVE HUNDRED (7,500) of common stock, each share having the par value of ONE DOLLAR (\$1.00)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Sandra Henry 2655 Pine Tree Drive Miramar,FL 33023

# ARTICLE V INCORPORATORS(S) See instructions for officers/directors

The names(s) and street address(es) of the incorporators is (are):

Sandra Henry 2655 Pine Tree Drive Miramar,FL 33023

The undersigned incorporator(s) has (have) executed these articles of incorporation this	The unde
22 day of <u>June</u> , 19 <u>98</u> .	
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An additional article must be added if an effective date is requested.)	(An addit

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, 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 corporation is:

Jamerican Insurance Agency, Inc.

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

Sandra Henry 2655 Pine Tree Drive Miramar,FL 33023 98 JUN 22 AM 10: 29
SECRETARY OF STATE

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)

DATE

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