

TRANSMITTAL LETTER

P98000097193

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

400002688254--4
-11/16/98--01084--002
*****78.75 *****78.75

SUBJECT: Coastal Insurance Services of Jacksonville, 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

ADDITIONAL COPY REQUIRED

FROM: Horace A. Roberts
Name (Printed or typed)

6054 Arlington Expressway, Suite 6
Address

Jacksonville, FL 32211
City, State & Zip

(904) 723-0055
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 NOV 16 PM 4: 31

FILED

Dmc
11-18-98

EFFECTIVE DATE
Jan 1, 1999

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

FILED

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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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Coastal Insurance Services of Jacksonville, Inc.

EFFECTIVE DATE
Jan 1, 1999

ARTICLE II PRINCIPAL OFFICE

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

6054 Arlington Expressway, Suite 6
Jacksonville, FL 32211

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Horace A. Roberts
6054 Arlington Expressway, Suite 6
Jacksonville, FL 32211

ARTICLE V INCORPORATOR

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

Horace A. Roberts
6054 Arlington Expressway, Suite 6
Jacksonville, FL 32211

ARTICLE VI: These Articles Of Incorporation are to be effective January 1, 1999.

Horace A. Roberts
Signature/Incorporator

11/12/98
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

Horace A. Roberts
Signature/Registered Agent

11/12/98
Date

**CERTIFICATE OF DESIGNATION
OF
REGISTERED OFFICE AND REGISTERED AGENT**

Pursuant to section 607.0501 of The Florida Business Corporation Act, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office and registered agent, in the State of Florida.

1. The name and address of the corporation's registered agent and registered office is:

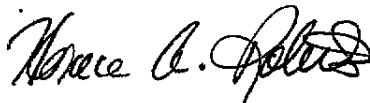
Name Horace A. Roberts

Street address 6054 Arlington Expressway, Suite 6
Jacksonville, FL 32211

FILED
98 NOV 16 PM 4:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as the 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 of registered agent:



Date of signature:

November 12, 1998