

P9900052359

TRANSMITTAL LETTER

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

**SUBJECT:** Insurance Claims Resources, Inc.  
(Proposed corporate name - must include suffix)

900002897479--9  
-06/07/99--01166--001  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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 of Status

☐ \$78.75 Filing Fee & Certified Copy  
☒ \$87.50 Filing Fee, Certified Copy & Certificate of Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Edwin L. Sellers  
Name (Printed or typed)

22924 Sterling Manor Loop  
Address

Lutz, Florida 33549  
City, State & Zip

(813) 948-0300  
Daytime Telephone number

FILED  
99 JUN -7 AM 7:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

6-10  
WS

## 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:

Insurance Claims Resources, Inc.

### **ARTICLE II      PRINCIPAL OFFICE**

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

22924 Sterling Manor Loop  
Lutz, Florida 33549

### **ARTICLE III      SHARES**

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

100

### **ARTICLE IV      INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Edwin L. Sellers  
22924 Sterling Manor Loop  
Lutz, Florida 33549

### **ARTICLE V      INCORPORATOR**

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

Edwin L. Sellers  
22924 Sterling Manor Loop  
Lutz, Florida 33549



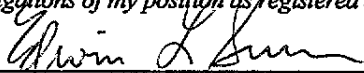
Signature/Incorporator

6/2/99

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



Signature/Registered Agent

6/2/99

Date

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