

TRANSMITTAL LETTER

P99000102225

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

SUBJECT:

Florida Specialty Group Inc
(Proposed corporate name - must include suffix)

300003050183-4
-11/19/99-01090-006
*****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:

Jim Morris

Name (Printed or typed)

PO Box 780765

Address

Sebastian, FL 32958

City, State & Zip

561-473-3261

Daytime Telephone number

FILED
1999 NOV 19 AM 9:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION

FILED

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

1999 NOV 19 AM 9 52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

FLORIDA SPECIALTY GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

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

449 COLUMBUS ST.
SEBASTIAN, FL. 32958

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:

JAMES W. MORRIS III
449 COLUMBUS ST.
SEBASTIAN, FL 32958

ARTICLE V INCORPORATOR

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

JIM MORRIS
449 COLUMBUS ST.
SEBASTIAN, FL. 32958


Signature/Incorporator

11-17-99
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

11-17-99
Date