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TRANSMITTAL LETTER

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

100003070341--6  
-12/15/99-01007-004  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: NANCY ROBERTS INSURANCE, INC. EFFECTIVE DATE 01-01-00  
(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: NANCY A. ROBERTS  
Name (Printed or typed)

5003 EAST TAMiami TRAIL  
Address

NAPLES, FLORIDA 34113  
City, State & Zip

(941) 774-2624  
Daytime Telephone number

FILED  
99 DEC 14 AM 11:31  
TALLAHASSEE, FLORIDA

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

S. Thompson DEC 16 1999

EFFECTIVE DATE  
01-01-00

ARTICLES OF INCORPORATION

1. The name of the corporation shall be: NANCY ROBERTS INSURANCE, INC.
2. The principal place of business and mailing address of the corporation is: 5003 EAST TAMiami TRAIL, NAPLES, FLORIDA 34113
3. The corporation shall have the authority to issue 5000 shares of stock
4. The registered agent of the corporation is NANCY A. ROBERTS  
registered street address is 5003 EAST TAMiami TRAIL, NAPLES  
Florida 34113
5. The initial Board of Directors shall have 2 member(s) whose name(s) and address(es)  
is/are as follows: NANCY A. ROBERTS AND DAVID W. ROBERTS  
5003 EAST TAMiami TRAIL, NAPLES, FL 34113

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is NANCY A. ROBERTS whose  
street address is 5003 EAST TAMiami TRAIL, NAPLES, FL 34113

PLEASE FILE THIS CORPORATION, EFFECTIVE

Dated 12/8/99

JANUARY 1, 2000

Nancy A. Roberts  
Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 12/8/99

Nancy A. Roberts  
Registered Agent