

P00000099380

TRANSMITTAL LETTER

FILED

00 OCT 20 AM 9: 54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: TIMBUKTU RISK MANAGEMENT INC.
(Proposed corporate name - must include suffix)

400003433984--2

-10/20/00--01082--002
*****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: ROBERT J PERES
Name (Printed or typed)

2 ALHAMBRA PLAZA - SUITE 1200
Address

CORAL GABLES, FL 33134
City, State & Zip

305-442-1500 or 305-283-9495
Daytime Telephone number

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

W 25473
PH 10/23/00

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.

FILED

00 OCT 20 AM 9: 54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

TIMBUKTU RISK MANAGEMENT INC.

ARTICLE II PRINCIPAL OFFICE

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

2 ALHAMBRA PLAZA - SUITE 1200
CORAL GABLES, FL. 33134

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

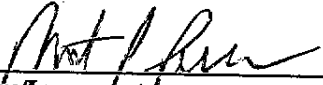
The name and Florida street address of the initial registered agent are:

ROBERT J. PERES - 2 ALHAMBRA PLAZA - SUITE 1200
CORAL GABLES, FL. 33134

ARTICLE V INCORPORATOR

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

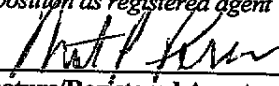
ROBERT J. PERES - 2 ALHAMBRA PLAZA - SUITE 1200
CORAL GABLES, FL. 33134


Signature/Incorporator

10/18/00
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

10/18/00
Date