POIDDO92550

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

200004598382---0 -09/19/01--01046--022 ******

| SUBJECT: WALREN (PROPOSED CORPOR | SCHACK TWO RATE NAME - MUST INCLUDE SUFFIX) |
|----------------------------------|--|
|----------------------------------|--|

| Enclosed are an orig | inal and one (1) copy of the ar | ticles of incorporation and | a check for: |
|----------------------|--|--|--|
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| | _ | | |

| FROM: SCHACK Name (Printed or typed) | - = | | |
|---|-----------|----------|---|
| 564 N. University Drive | SECRETIA: | 01SEP | H |
| Plantation Florada 33324 City, State & Zip | SEL FLOR | 9 AH II: | |
| 954 - 475 - 2887 Daytime Telephone number | | 2 | |

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

| ARTICLES OF INCORPORATION | | |
|--|----------------------|---|
| In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) | • | |
| ARTICLE I NAME | | - manety |
| The name of the corporation shall be: | | OI SEC |
| WARREN SCHACK INC. | | 01 SEP SECRETA |
| | | AS T |
| ARTICLE II PRINCIPAL OFFICE | | 1 SEP 19 MII: 21 ECRETARY OF STATE LLAHASSEF FLORID |
| The principal place of business/mailing address is: | | |
| 564 N-UNiversity Drive | | |
| Plantation Florida 33324 | | |
| · · · · · · · · · · · · · · · · · · · | | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: | | |
| To Constitution is organized is. | | |
| TO SEN Health Insurance, To sen List To sen variable Annulates, 1099 Ton ARTICLE IV SHARES | fe Insur | cuc6 |
| The variable Annuities, 1099 Tan | * Filing | · |
| | | 240401 |
| The number of shares of stock is: 1000 | | |
| | | |
| ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) | | |
| The name(s), address(es) and title(s): | | |
| WArren Schack | | |
| Joy N. University Drive | | |
| brantation Horida 333916 | | |
| Principle officer | | |
| ARTICLE VI REGISTERED AGENT | | |
| The name and Florida street address of the registered agent is: | - | |
| WATTEN Schoole | | |
| Jose n. university brue | | |
| blantation Elacida 33377 | | |
| ARTICLE VII INCORPORATOR | | |
| The name and address of the Incorporator is: | ÷ | |
| WATTEN SCHACK | | |
| 564 N. university brive | | |
| Plants For Comments | | |
| Plantaton Florta 337324 | ; ; ; ; | ***** |
| Having been named as registered agent to accept service of process for the above stated co | | |
| certificate, I am familiar with and accept the appointment as registered agent and agree to a | ict in this capacity | |
| [10011 | 911- | 10. |
| Signature/Registered Agent | Date | ; !~! |
| Signature/Registered Agent WACLE SCHACK | 7 | |
| he aw- | 911.11 | Cir. |
| | Date | <u>,~~.</u> > |
| Signature/Incorporator いみかってもいっていたみでく | | |