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DIVISION OF CORPORATIONS  
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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (212) 431-5000  
Fax Number : (212) 431-1441

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**FLORIDA PROFIT/NON PROFIT CORPORATION**

**BYCK FINANCIAL SERVICES INC.**

Certificate of Status	0
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Stanley T Byck Mba Inc

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TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

BYCK FINANCIAL SERVICES INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

7285 MOROCCA LAKE DRIVE, DEL REY BEACH, FL 33448  
*Del Rey*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

INSURANCE CORPORATION

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

STANLEY BYCK, PRESIDENT & DIRECTOR, 7285 MOROCCA LAKE DRIVE, DEL REY BEACH, FL 33448

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

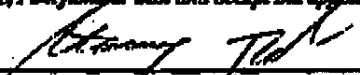
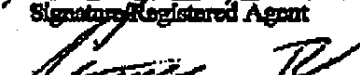
STANLEY BYCK, 7285 MOROCCA LAKE DRIVE, DEL REY BEACH, FL 33448

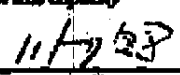

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

STANLEY BYCK, 7285 MOROCCA LAKE DRIVE, DEL REY BEACH, FL 33448

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

X  
  
\_\_\_\_\_  
Signature/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date  
  
\_\_\_\_\_  
Date