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To: Division of Corporations  
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From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

FLORIDA PROFIT CORPORATION OR P.A.

ABRAHANTES INSURANCE, INC.

Certificate of Status	0
Certified Copy	1
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**FLORIDA DEPARTMENT OF STATE**  
Sandra B. Mortham  
Secretary of State

December 22, 1998

FAS-T CORP.

SUBJECT: ABRAHANTES INSURANCE, INC.  
REF: W98000028619

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

ARTICLE EIGHT THE INTIAL BOARD OF DIRECTOS BLANK.

If you have any further questions concerning your document, please call (850) 487-6067.

Neysa Culligan  
Document Specialist

FAX Aud. #: H98000023847  
Letter Number: 898A00060080

ARTICLE OF INCORPORATION

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following articles of incorporation:

ARTICLE ONE

The name of the corporation is ABRAHANTES INSURANCE, INC.

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ARTICLE TWO

The duration of the corporation is perpetual.

ARTICLE THREE

The general purpose for which the corporation is organized are:

- 1.- To engage in the business of car and property ins.
- 2.- To transact any other lawful business for which corporations may be incorporated under the Florida General Corporation Act.
- 3.- To do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing.

PREPARED BY: ASHLAND ASSURANCE, INC  
ALLIN TURBAY  
608 N.W 57th AVE  
MIAMI, FL 33126  
(305) 262-4053

ARTICLE FOUR

The aggregate number of shares which the corporation is authorized to issue is 100. Such shares shall be of a single class, and shall be \$5.00 par value.

ARTICLE FIVE

The corporation is authorized to issue only one class of stock, and all issued stock shall be held of record by not more than ten persons. Stock shall be issued and transferable only to natural persons.

ARTICLE SIX

No stockholder shall have the right to sell, assign, pledge, transfer, devise, or otherwise dispose of any of the shares of the corporation without first offering such shares for sale to the corporation at the net asset value thereof.

ARTICLE SEVEN

The street address of the initial business office of the corporation is 434 S.W 87th Court, Miami, Florida 33174  
Ailin Turbay, and the name of its initial registered agent is

ARTICLE EIGHT

The number of directors constituting the initial board of directors of the corporation is two . The name and address of each person who is to serve as a member of the initial board of directors is:

NAME	ADDRESS
Jesus Aguila President	434 S.W 87 th Court Miami,Fl 33174
Martha Garcia Montes Secretary	434 S.w 87th Court Miami Florida

ARTICLE NINE

A unanimous vote of directors for effective directors action is required at all directors meetings.

ARTICLE TEN

The name and address of each incorporator is:

NAME	ADDRESS
Ailin Turbay	608 N.W 57th AVE Miami,Florida 33174

Executed by the undersigned at MIAMI, FLORIDA  
on December, 22, 1998.

CERTIFICATE DESIGNATING (OR CHANGING) PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

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In pursuance of Chapter 607.34 Florida Statutes, the following submitted, in compliance with said Act:

First That ABRAHANTES INSURANCE, INC  
(NAME OF CORPORATION)

desiring to organize under the laws of the State of FLORIDA  
(FLORIDA)

with its principal office, as indicated in the articles of incorporation at City of MIAMI county  
(CITY)

of DADE, State of FLORIDA  
(COUNTRY) (STATE)

has named ALLIN TURBAY  
(NAME OF RESIDENT AGENT)

located at 608 N.W 57th AVE Miami, Florida 33126  
(STREET ADDRESS AND NUMBER OF BUILDING,  
POST OFFICE BOX ADDRESS NOT ACCEPTABLE)

city of FLORIDA, County of DADE  
(CITY) (COUNTRY)

State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

BY [Signature]  
SIGNATURE  
REGISTERED AGENT  
AND  
INCORPORATOR