

(SAMPLE LETTER OF TRANSMITTAL)

P99000023608

Date FEBRUARY 26TH, 1999

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

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***122.50 ***78.75

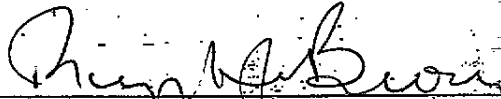
Re: RUPERT H. BROWN INSURANCE AGENCY, Inc.
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,



(individual's name)
RUPERT H. BROWN

RUPERT H. BROWN INSURANCE AGENCY, INC.
(name of corporation)

FILED
99 MAR - 7 09 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAILING ADDRESS OF CORPORATION		
4176 NORTH STATE ROAD 7 LAUDERDALE LAKES, FL 33319		
PHONE		
(954)	486-7474	
Area Code	Number	Ext.

B. BROCK MAD 15 1999

ARTICLES OF INCORPORATION

of

RUPERT H. BROWN INSURANCE AGENCY, INC.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

RUPERT H. BROWN INSURANCE AGENCY, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida. insurance sales

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue five hundred shares (500) of COMMON Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME	RUPERT H. BROWN INSURANCE AGENCY, INC.		
ADDRESS	4176 NORTH STATE ROAD 7		
CITY	LAUDERDALE LAKES	FLORIDA	ZIP 33319

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	RUPERT H. BROWN		
ADDRESS	12300 NW 9th STREET		
CITY	PLANTATION	FLORIDA	ZIP 33325

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	RUPERT H. BROWN		
ADDRESS	12300 NW 9th STREET		
CITY	PLANTATION	STATE: FL	ZIP 33325
NAME			
ADDRESS			
CITY		STATE:	ZIP
NAME			
ADDRESS			
CITY		STATE:	ZIP

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99 MAR -10 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows.

NAME	RUPERT BROWN		
ADDRESS	12300 NW 9th STREET		
CITY	PLANTATION	STATE	FL ZIP 33325
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 26th day of FEBRUARY, 19 99.

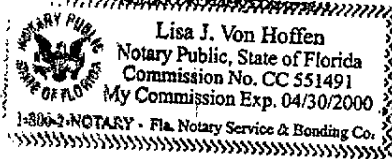
Rupert H. Brown (Seal)
 RUPERT H. BROWN (Seal)
 _____ (Seal)

STATE OF FLORIDA)
 COUNTY OF BROWARD) SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

X Rupert H. Brown PERSONALLY KNOWN TO NOTARY
 RUPERT H. BROWN Form of Identification
 _____ Form of Identification
 _____ Form of Identification

Known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that HE executed these Articles of Incorporation, that I relied upon the form of identification of the above named person as indicated opposite each name, and that an oath (was)(was not) taken.



Witness my hand and official seal in the County and State last aforesaid this 26th day of February, 19 99
Lisa J. von Hoffen
 Notary Public
 Lisa J. von Hoffen

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

RUPERT H. BROWN INSURANCE AGENCY, INC.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 4176 NORTH STATE ROAD 7

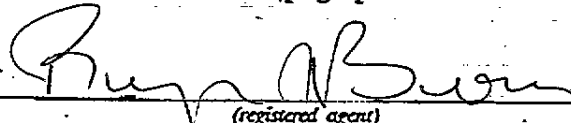
LAUDERDALE LAKES FL 33319

has named RUPERT H. BROWN

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.



(registered agent)
RUPERT H. BROWN

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED