

P08000058167

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

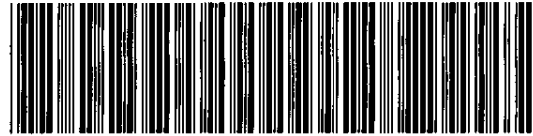
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
08 JUN 13 AM 10:27
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2009 JUN 13 AM 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CS. 6-16

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

(City, State, Zip)

385-6735 ¹¹⁰⁶

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. ACHILLES HEEL High Risk Life Insurance, Inc
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

- Walk in
 Pick up time 2:00
 Certified Copy
 Mail out
 Will wait
 Photocopy
 Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

FILED

ARTICLES OF INCORPORATION

2009 JUN 13 AM 10:32

OF

ACHILLES HEEL HIGH RISK LIFE INSURANCE, INC. TALLAHASSEE, FLORIDA
SECRETARY OF STATE

THE UNDERSIGNED, for the purpose of forming a corporation for profit pursuant to Chapter 607, Florida Statutes, does hereby adopt the following Articles of Incorporation:

ARTICLE I
NAME OF CORPORATION

The name of the corporation shall be:

ACHILLES HEEL HIGH RISK LIFE INSURANCE, INC.

(the "Corporation").

ARTICLE II
GENERAL NATURE OF BUSINESS

The general nature of the business to be transacted by the Corporation shall be to engage in any and all lawful business permitted under the laws of the United States and the State of Florida.

ARTICLE III
CAPITAL STOCK

A. The total authorized capital stock of the Corporation is one thousand (1,000) shares of Common Stock, par value One Dollar (\$1.00) per share.

B. Every shareholder, upon the sale for cash of any new stock of the Corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro

rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE IV
TERM OF EXISTENCE

The Corporation shall exist perpetually.

ARTICLE V
ADDRESS OF PRINCIPAL OFFICE IN THIS STATE

The initial street address of the principal office of the Corporation in the State of Florida is 8000 North Federal Highway, Suite 216, Boca Raton, FL 33487. The Board of Directors may from time to time move the principal office to another address in Florida.

ARTICLE VI
NUMBER OF DIRECTORS

The Corporation shall have not less than one (1) Director.

ARTICLE VII
FIRST BOARD OF DIRECTORS

The names and street addresses of the initial members of the Board of Directors are:

Lance Ganis
4400 N.W. 30th Street
Apartment 324
Coconut Creek, FL 33066-2141

David J. Zweibel
9700 Enchanted Pointe Lane
Boca Raton, FL 33496

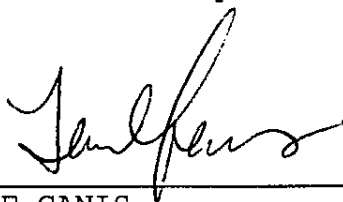
ARTICLE VIII
INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is Lance Ganis at 4400 N.W. 30th Street, Apartment 324, Coconut Creek, FL 33066-2141.

ARTICLE IX
INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Corporation is 8000 North Federal Highway, Suite 216, Boca Raton, FL 33487, and the name of the initial registered agent of the Corporation at that address is Lance Ganis.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 11th day of June, 2008.



LANCE GANIS

STATE OF FLORIDA)
) SS:
COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 11th day of June, 2008, by LANCE GANIS, as incorporator to these Articles, who is personally known to me or who has produced _____ as identification and who did not take an oath.

My Commission Expires:



NOTARY PUBLIC, State of Florida
Print name: Gregory J. Ritter

Cynthia C. Mendoza
Commission # DD339728
Expires August 27, 2008
Bonded Troy Fair - Insurance, Inc.



Cynthia C. Mendoza
Commission # DD339728
Expires August 27, 2008
Bonded Troy Fair - Insurance, Inc. 800-335-7019

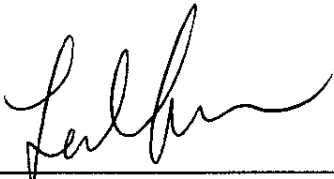
CERTIFICATE DESIGNATING REGISTERED OFFICE
FOR THE SERVICE OF PROCESS WITHIN FLORIDA,
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.091, Florida Statutes, the
following is submitted:

ACHILLES HEEL HIGH RISK LIFE INSURANCE, INC., a corporation
being organized under the laws of the State of Florida, designates
8000 North Federal Highway, Suite 216, Boca Raton, FL 33487, as
its registered office and has named LANCE GANIS as its agent to
accept service of process within the State of Florida.

ACKNOWLEDGMENT:

Having been named to accept service of process for ACHILLES
HEEL HIGH RISK LIFE INSURANCE, INC. at the place designated in this
Certificate, I hereby agree to act in such capacity and agree to
comply with the provisions of said Act with respect to keeping such
office open.

By: 
REGISTERED AGENT

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2908 JUN 13 AM 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA