F17975

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(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS

FILED

FEB 13 4 07 PM '81
DIVISION OF CORPORATIONS
MIAMI FLORIDA

NAME Rollnick, Squitero and Katz, P.A.

ADDRESS 2699 S. Bayshore Dr.

CITY Miami STATE Fla. ZIP CODE 33133

AREA CODE & PHONE NUMBER 305

NAME OF CORPORATION All - Dade Insurance, Inc.

F17975

8/27

FOR OFFICE USE ONLY

7977 3/19/81

✓	DOMESTIC		AMENDMENT	7977 3/19/81	SEARCH
	FOREIGN		DISSOLUTION	7977 3/19/81	MERGER
✓	PROFIT		REINSTATEMENT	7977 3/19/81	MARK
	NON-PROFIT		ANNUAL REPORT		RESERVATION
	LIMITED PARTNERSHIP		CERTIFICATE UNDER SEAL	✓	CERTIFIED COPY

C

C. TAX
FILING $30
C. COPY 15
R. AGENT 15
TOTAL 3
BALANCE DUE $ $63
REFUND $

OK
Mail

2/25/81

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FEB 13 8 26 AM '81
SECRETARY OF STATE
MIAMI, FLORIDA

FLORIDA – STATE OF THE ARTS

F 17975

FILED

FEB 13 4 01 PM '61

DIVISION OF CORPORATIONS MIAMI FLORIDA

ARTICLES OF INCORPORATION

OF

ALL-DADE INSURANCE, INC.

I, the undersigned, being over the age of eighteen (18) years, a citizen of the United States of America, and competent to contract, hereby present these Articles for the formation of a corporation under the laws of the State of Florida, by and under the provisions of the statutes of the State of Florida providing for the formation, liability, rights, privileges and immunities of a corporation for profit.

ARTICLE I

The name of this Corporation shall be:

ALL-DADE INSURANCE, INC.

ARTICLE II

The general nature of the business or businesses to be transacted by this Corporation shall be:

(1) To serve as an agency for the sale of insurance policies within the State of Florida.

(2) To buy and otherwise acquire, sell, produce, manufacture and dispose of all kinds of raw or finished materials, merchandise, commodities, machinery, tools and products, including, but not limited to, any and all of the foregoing items required for the above.

(3) To engage generally in any form of manufacturing or mercantile enterprises not contrary to law.

(4) To acquire or rent, lease, improve and convey lands and lands under water and riparian, dock and maritime rights, to construct docks, drydocks, wharves, piers, basins, derricks, elevators, warehouses, manufactories, stores, shops, tracks and other structures thereon; and to rent, lease and convey the same; to buy, sell, store, manufacture, import and export merchandise, machinery and products; to build, own, repair and charter ships and vessels and afford them dockage; to commission, own, buy and sell such ships and vessels, and generally to carry on a land improvement, real estate, dock, shipping and merchandise business.

(5) To act as agent or representative of corporations, firms and individuals.

To make and enter into all kinds of contracts, agreements and obligations by or with any person or persons, corporation or corporations, for the purchasing, acquiring,

holding, manufacturing and selling or otherwise disposing of, either as a principal or agent, upon commission or otherwise, any articles of personal property whatsoever, and generally with full power to perform any and all acts connected therewith or arising therefrom or incidental thereto, and any and all acts proper or necessary for the purposes of the business.

To carry on and undertake any business, undertaking, transaction or operation commonly carried on or undertaken by merchants, commission men, factors, importers and manufacturers' agents, and, in the course of such business, to draw, accept, endorse, acquire and sell all or any negotiable or transferable instruments and securities.

(6) To borrow money and contract debts when necessary for the transaction of its business or for the exercise of its corporate rights, privileges, or franchises, or for any other lawful purpose of its incorporation; to issue bonds, promissory notes, bills of exchange, debentures and other obligations and evidences of indebtedness payable at a specified time or times, or payable upon the happening of a specified event or events, whether secured by mortgage, pledge, or otherwise, or unsecured, for money borrowed, or in payment for property purchased or acquired, or any other lawful objects.

(7) To guarantee, purchase, hold, sell, transfer, assign, mortgage, pledge or otherwise dispose of the shares of the capital stock of, or any bonds, securities or evidences of indebtedness of, or corporation created by any other state or government, and, while owner of such stock, to exercise all rights, powers and privileges of ownership, including the right to vote thereon.

(8) To purchase, hold, sell, and transfer shares of its own capital stock; subject, however, to such limitations as may be provided by law; and provided further that shares of its own capital stock owned by the corporation shall not be voted upon, directly or indirectly, nor counted as outstanding for the purpose of any stockholders' quorum or vote.

(9) To purchase or otherwise acquire, directly and/or through ownership of stock of any corporation, all or any part of the business, good will, rights, property and assets of all kinds, of any corporation, association, partnership or individual, and to pay for the same in cash, with the stock of this corporation, bonds, or otherwise, and to hold or in any manner dispose of the whole or any part of the property so purchased; or to conduct in any lawful manner the whole or any part of the business so acquired, provided that such business is not a prohibited exercise of its corporate power, and to exercise all the powers necessary or convenient in or about the conduct and management of such business.

Without limiting any of the objects and powers of the corporation, it is expressly declared and provided that the Corporation shall have power in carrying on its business or for the purpose of attainment of any of the objects hereinabove mentioned, to make and perform contracts of any

kind and description and do any and all other acts and things and to exercise any and all other powers, either as principal, agent or broker, conferred by the laws of Florida upon corporations formed under the pertinent Statutes of the State of Florida which a copartnership or natural person could do and exercise and which are now or hereafter may be authorized by law; but it is expressly provided that nothing in this certificate contained shall confer upon the Corporation any power requiring the exercise of the right of eminent domain.

ARTICLE III

STOCK The maximum number of shares outstanding at any one time shall be One Thousand (1,000) shares at par value of One ($1.00) Dollar per share.

ARTICLE IV

CAPITAL The corporation shall begin business with not less than the sum of ONE THOUSAND AND NO/100 ($1,000.00) DOLLARS.

ARTICLE V

CORPORATE EXISTENCE The corporation shall have perpetual existence and shall commence business upon issuance of a corporate charter.

ARTICLE VI

POST OFFICE ADDRESS The principal office or place of business of the Corporation shall be: 18020 S.W. 87th Court, Miami, Florida 33157, or such other places as may be designated by the Board of Directors.

ARTICLE VII

REGISTERED OFFICE AND REGISTERED AGENT The registered office for the Corporation and the registered Agent for the Corporation at that address are the following: PENN B. CHABROW, 2699 South Bayshore Drive, Suite 700A, Miami, Florida 33133.

ARTICLE VIII

NUMBER OF DIRECTORS The number of Directors shall not

be less than one (1) and not more than seven (7).

ARTICLE IX

NAMES AND ADDRESSES OF DIRECTORS The names and addresses of the first Board of Directors of the Corporation are as follows:

MICHAEL K. SCHULER
18020 S.W. 87th Court
Miami, Florida 33157

EDWARD P. MacDOUGALL
18020 S.W. 87th Court
Miami, Florida

ARTICLE X

OFFICERS The names and post office addresses of the officers of the Corporation are as follows:

President:	MICHAEL K. SCHULER 18020 S.W. 87th Court Miami, Florida 33157
Secretary-Treasurer:	EDWARD P. MacDOUGALL 18020 S.W. 87th Court Miami, Florida 33157

ARTICLE XI

SUBSCRIBERS: The name and Post Office Address of the Subscriber to these Articles of Incorporation and the number of shares of stock which he agrees to take is as follows:

NAME	ADDRESS	NO. SHARES
MICHAEL K. SCHULER	18020 S.W. 87th Court Miami, Florida 33157	1,000

The proceeds of the stock subscribed for will amount to at least ONE THOUSAND AND NO/100 ($1,000.00) DOLLARS.

ARTICLE XII

PREEMPTIVE RIGHTS Every shareholder, upon the sale for cash of any new stock of this 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 XIII

BY-LAWS The power to adopt, alter, amend or repeal By-Laws shall be vested in the Board of Directors.

ARTICLE XIV

INDEMNIFICATION (a) The Corporation shall indemnify any person made a party to an action by or in the right of the Corporation to procure a judgment in its favor by reason of his being or having been a director or officer of the Corporation, or any other corporation which he served as such at the request of the Corporation, against the reasonable expenses, including attorney's fees, actually and necessarily incurred by him in connection with the defense or settlement of such action, or in connection with any appeal therein, except in relation to matters as to which such director or officer is adjudged to have been guilty of negligence or misconduct in the performance of duty to the Corporation.

(b) The Corporation shall indemnify any person made a party to an action, suit or proceeding other than one by or in the right of the Corporation to procure a judgment in its favor, whether civil or criminal, brought to impose a liability or penalty on such person for an act alleged to have been committed by such person in his capacity of director or officer of the Corporation, or of any other corporation which he served as such at the request of the Corporation, against judgments, fines, amounts paid in settlement and reasonable expenses, including attorney's fees, actually and necessarily incurred as a result of such action, suit or proceeding, or any appeal therein, if such director or officer acted in good faith in the reasonable belief that such action was in the best interests of the Corporation, and in criminal actions or proceedings, without reasonable ground for belief that such action was unlawful.

The termination of any such civil or criminal action, suit or proceeding by judgment, settlement, conviction or upon a plea of nolo contendere shall not in itself create a presumption that any such director or officer did not act in good faith in the reasonable belief that such action was in the best interests of the Corporation or that he had reasonable grounds for belief that such action was unlawful.

(c) Such indemnification shall not be deemed exclusive of any other rights to which those indemnified may be entitled under any By-Laws, agreement, vote of stockholders, or otherwise.

IN WITNESS WHEREOF the undersigned has made and subscribed this Certificate of Incorporation at Miami, Dade County, Florida, for the uses and purposes aforesaid, this 11th day of February, 1981.

Michael K Schuler (SEAL)

STATE OF FLORIDA :

COUNTY OF DADE :

Before me, the undersigned authority, personally appeared MICHAEL K. SCHULER, to me well known to be the person described in and who subscribed the above and foregoing Articles of Incorporation; and he freely and voluntarily acknowledged before me according to law that he made and subscribed the same for the uses and purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the county and state last aforesaid this 11th day of February, 1981.

NOTARY PUBLIC, STATE OF FLORIDA
AT LARGE

My Commission Expires:

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES JUNE 1 1983
BONDED THRU GENERAL INS. UNDERWRITERS

FILED

FEB 13 4 07 PM '81

DIVISION OF CORPORATIONS

STATE OF FLORIDA

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

The Incorporation of ALL-DADE INSURANCE, INC. in accordance with Chapter 607.034, Florida Statutes, hereby designates its place of business for the service of process and agent upon whom process may be served as follows:

THAT, ALL-DADE INSURANCE, INC. desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Incorporation located in Miami, State of Florida, hereby designates and names PENN B. CHABROW, ESQUIRE, whose address is 2699 South Bayshore Drive, Suite 700A, Miami, Florida 33133, as its Agent to accept service of process within this State.

ACCEPTANCE

Having been named to accept service of process for the above-stated corporation, at the 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.

PENN B. CHABROW

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT **1982**

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
FEB 13 5 4? PM '82
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required — Make Checks Payable To: *Secretary of State*

F17975
ALL-DADE INSURANCE, INC.
18020 S.W. 87TH COURT
MIAMI, FL. 33157

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient
Street Address: 15930 S.W. 96 Ave. #133
MIAMI
FLA. 33157
State / Zip Code

Date Incorporated: 02/13/1981

3. Federal Employer Identification Number (FEIN): 59-2073443

Date of Last Report:

Names of Officers and Directors	Title	Street Address of Each Officer and Director	City and State
SCHULER, MICHAEL K.	P/D	18020 S.W. 87TH COURT	MIAMI, FL.
MACDOUGALL, EDWARD P.	S/T/D	18020 S.W. 87TH COURT	MIAMI, FL.

Registered Agent Information

CHABROW, PENN B.
2699 SOUTH BAYSHORE DRIVE ,SUITE 700A
MIAMI, FL. 33133

6. Name and Address of New Registered Agent
Name: JEFFERY FEUER, P.A.
Street Address: 20466 South Dixie Hwy.
City and Zip Code: Miami, FLA. 33189

Signed: [signature] DATE 1/15/82

$3.00 additional fee required for Registered Agent changes.

[signature] Michael K. Schuler
Date: 1/14/82
Name of Signing Officer: MICHAEL K SCHULER
Title: PRES
Telephone Number: (305) 252 1874

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1983

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

JAN 27 [illegible] 1983

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

F17975
ALL-DADE INSURANCE, INC.
15930 S W 96 AVE #133
MIAMI, FLORIDA 33157

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified to Do Business in Florida: 02/13/1981

4. Federal Employer Identification Number (FEIN): 59-2073342

5. Date of Last Report: 02/19/1982

6. Names and Street Addresses of Each Officer and Director

Name of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
SCHULER, MICHAEL K.	P/D	18020 S.W. 87TH COURT	MIAMI, FL.
MACDOUGALL, EDWARD P.	S/T/D	18020 S.W. 87TH COURT	MIAMI, FL.
SCHULER, MICHAEL K.	P/D	9373 S.W. 184 TR.	MIAMI, FLA. 33157
MAC DOUGALL, EDWARD P.	S/T/D	9015 S.W. 202 TR.	MIAMI, FLA. 33189

Registered Agent Information

7. Name and Address of Current Registered Agent

FEVER, JEFFREY, P A
20466 SOUTH DIXIE HWY
33189

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of [illegible], submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

The change was authorized by resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath

Signature: Michael K Schuler Date: 1/5/83

Name and Title of Signing Officer: MICHAEL K. SCHULER pres.

Telephone Number: 252-1873

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1984

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

MAY 19 2 23 PM 1984

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $10 Required — Make Checks Payable To: *Secretary of State*

1. Name(s) & Address of Corporation Principal Office

F17975
ALL-DADE INSURANCE, INC.
15930 S W 96 AVE #133
MIAMI, FLORIDA 33157

If above address is incorrect in any way, enter the correct address in Item 2 include Zip Code

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address: 16935 So. Dixie Hwy.
P.O. Box No:
City: Miami
State: FL. Zip Code: 33157

3. Date of Incorporation or Qualified Foreign Entity Business in Florida: 02/13/1981

4. Federal Employer Identification Number (FEIN): 59-2073342

5. Date of Last Report: 01/27/1983

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
MACDOUGALL, EDWARD P	S/T/D	9015 SW 202 TR	MIAMI, FL 0000
SCHULER, MICHAEL K	P/D	18020 SW 87TH COURT	MIAMI, FL 0000

Registered Agent Information

7. Name and Address of Current Registered Agent

FEVER, JEFFREY, P A
20466 SOUTH DIXIE HWY
MIAMI, FLA 33189

8. Name and Address of New Registered Agent

Name:
Street Address (Do NOT Use P.O. Box Number):
City, State and Zip Code:

Pursuant to the provisions of Sections 607.034 and 607.047, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

The change was authorized by resolution duly adopted by its board of directors on .....

.....
(Registered Agent Accepting Appointment) DATE .....

$3.00 additional fee required for Registered Agent changes.

See signature instructions under instructions on reverse side of this form

I Hereby Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. And Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath

Signature: Michael K. Schuler — Date: 1/30/84

Typed Name of Signing Officer: MICHAEL K SCHULER — Title: PRES. — Telephone Number: (305) 252 1873

If you desire a certified copy, check the box below and include an additional $5.00 with your payment.

Certified Copy

(CR 6C-1.84)

90 DAY NOTICE OF INTENT TO DISSOLVE

CORPORATION

ANNUAL REPORT

1985

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1985 AUG -7 PM 12:30

SEC. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

◀ Read Notice and Instructions on Other Side Before Making Entries ▶

Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office:

F17975 6
ALL-DADE INSURANCE, INC.
16635 SO DIXIE HWY
MIAMI, FL 33157

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2 Enter Corporation Principal Office, if different from above address

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida	4 Federal Employer Identification Number (FEIN)	5 Date of Last Report
02/13/1981	59-2073342	05/15/1984

6 Names and Street Addresses of Each Officer and Director, as of December 31, 1984

1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City, State and Zip Code
MACDOUGALL, EDWARD P	S/T/D	9015 SW 202 TR	MIAMI, FL 33189
MACDOUGALL, EDWARD P	P/V	9015 SW 202 TR	MIAMI, FL.
~~SCHNEIDER, GEORGE~~	~~P/D~~	~~[illegible] COURT~~	~~[illegible] FL~~

Registered Agent Information

7 Name and Address of Current Registered Agent	8 Name and Address of New Registered Agent
~~FEVER, JEFFREY, P A~~ ~~[illegible] HWY~~ ~~MIAMI, FLA~~ ~~33189~~	Name 81 MACDOUGALL, EDWARD P. Street Address (Do NOT Use P.O. Box Number) 82 9015 SW 202 terr City and State 83 MIAMI, FL. Zip Code 84 33189

9 Pursuant to the provisions of Section(s) 607.031 and 607.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on 7/31/85

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE 7/31/85
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10 See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. Officer's Name must be listed in Block 6).

Signature _____ Date 7/31/85

Typed Name of Signing Officer: Edward P. MacDougall

Title: Pres

Telephone Number: 305-252-1573

11 Check here if you desire a Certificate of Status (Box 5) ☐

$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1986

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

CONSECUTIVE NO. PAGE

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $20 Required – Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office:

F17975 6
ALL-DADE INSURANCE, INC.
16535 SO DIXIE HWY
MIAMI, FL 33157

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified Business in Florida: 02/13/1981

4. Federal Employer Identification Number (FEIN): 59-2773342

5. Date of Last Report: 08/07/1985

6. Names and Street Addresses of Each Officer and Director as of December 31, 1985

Names of Officers and Directors 1	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
MACDOUGALL, EDWARD P	P/V/D	9015 SW 202ND TERRACE	MIAMI, FL 00000

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

MACDOUGALL, EDWARD P.
9015 SW 202 TERR.
MIAMI, FL 33189

8. Name and Address of New Registered Agent

Name 81

Street Address (Do NOT Use P.O. Box Number) 82

City and State 83: FL.

Zip Code 84

Pursuant to the provisions of Sections 607.334 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

The change was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$1.00 Additional fee required for Registered Agent changes

See signature instructions under instructions on reverse side of this form.

I Certify That An Officer of the Corporation, or a Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. And Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. The signature must be dated in Block 91.

Signature

Date 4-15-86

Edward P MacDougall Pres

Telephone Number 252-1873

FOR CERTIFICATE OF STATUS (PLEASE) ☐

$5 Additional Fee required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT
1987

George Firestone
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required -- Make Checks Payable To: Secretary of State

1 Name And Address of Corporation Principal Office

F17975
ALL-DADE INSURANCE, INC.
16935 SO DIXIE HWY
MIAMI, FL 33157

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

3 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

Date Incorporated or Qualified to do Business in Florida: 02/13/1981

6 Federal Employer Identification Number (FEIN): 59-2073342

5 Date of Last Report: 04/21/1986

Names and Street Addresses of Each Officer and Director as of December 31, 1986

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1. MACDOUGALL, EDWARD P	P/V/D	9015 SW 202ND TERRACE	MIAMI, FL 00000
2.			
3.			
4.			
5.			
6.			

REGISTERED AGENT INFORMATION

Name And Address of Current Registered Agent

MACDOUGALL, EDWARD P.
9015 SW 202 TERR.
MIAMI, FL 33189

8 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL.

Zip Code 85

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the aforementioned corporation, incorporated under the laws of the State of Florida, files this statement for the purpose of changing its registered office, or registered agent, or both, in the State of Florida.

The address of the registered office and the address of the business office of any registered agent changed by this statement are as follows:

The street address of the registered office is:

The name and address of the registered agent is:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.325, F.S.

SIGNATURE _____ DATE _____
Registered Agent Accepting Appointment

$3.00 additional fee required for Registered Agent changes.

See instructions and check boxes where applicable before signing this form.

I, the undersigned, As Officer of the Corporation (or Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S.) Certify That I Understand My Signature On This Report Has the Same Legal Effects As If Made Under Oath.
Officer signing must be listed in Block 81.

[signature]
Edward P. MacDougall Pres.

2/15/87

305 252-1173

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

P17975
ALL-DADE INSURANCE, INC.
16935 SO DIXIE HWY
MIAMI, FL 33157

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2 Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

7955 SW 20 Lane
Street Address 21

Miami, FL
P.O. Box No 22

City and State 23

Mia, FL 33189
Zip Code 24

Date Incorporated or Qualified to Do Business in Florida	02/13/1981	4 Federal Employer Identification Number (FEIN)	59-2073342	5 Date of Last Report	03/02/1987

Names and Street Addresses of Each Officer and Director as of December 31, 1987

Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
MACDOUGALL, EDWARD P	P/~~W/D~~	~~5015 SW YOUNG TERRACE~~ 7955 SW 201 TERR	MIAMI, FL 00000 Miami, FL 33189
FRANCIS P. DOSTALER	VP	15710 Whispering Pines Rd.	Miami, FL. 33157

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

MACDOUGALL, EDWARD P.
~~5015 SW 201 TERR.~~ 7955 SW 201 Lane
MIAMI, FL 33189 Miami, FL 33189

8 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL. | Zip Code 85

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on ...

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Section 607.325 F.S.

Signature .... DATE ....
(Registered Agent Accepting Appointment)

If ... corporation does not ... transacted business in Florida ...

See signature restrictions under instructions on reverse side of this form.

... Is An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Permitted by Chapter 607 F.S. ... of Prescribed Mailing ... On This Report Shall Have the Same Legal Effect As If Made Under Oath ... must be listed in Block 6.

Date 2-9-88

Signature of Signing Officer or Director: Edward P MacDougall

Title: Pres

Telephone Number: 3052521571

$5 Additional Fee required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FILED
1989 JUN 19 AM 11:42
FLORIDA DEPT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

ZIP + 4

P17975 6
ALL-DADE INSURANCE, INC.
7955 S.W. 201 TERR.
MIAMI, FL 33189-2117

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida	02/13/1981	4. Federal Employer Identification Number (FEIN)	59-2073342	5. Date of Last Report	02/22/1988

6. Names and Street Addresses of Each Officer and Director as of December 31, 1988

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
P	MACDOUGALL, EDWARD P	7955 S.W. 201 TERR.	MIAMI, FL 00000
V/P	DOSTALER, FRANCIS P.	19710 WHISPERING PINES	MIAMI, FL.

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

MACDOUGALL, EDWARD P.
7955 S.W. 201 TERR.
MIAMI, FL 33189

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Numbers) 82

Street Address 2 (Do NOT Use P.O. Box Numbers) 83

City and State 84 FL. Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on ____

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE ____ DATE ____
(Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida ____

See signature instructions under instructions on reverse side of this form.

11. I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Hereby Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath. (Signing officer must be listed in Block 6.)

Signature: [signature] Date: 6-12-89

Name of Signing Officer or Director: Edward P. MacDougall Title: Pres Telephone Number: 3052521873

FILE NOW! THIS REPORT MUST BE FILED BY NOVEMBER 7, 1990 OR THIS CORPORATION WILL BE DISSOLVED. FEE TO REINSTATE IS $236.25

CORPORATION ANNUAL REPORT 1990

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
90 AUG 13 PM 5:39

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

Name and Address of Corporation Principal Office: F17975 6

ZIP + 4 PRESORT

ALL-DADE INSURANCE, INC.
7955 S.W. 201 TERR.
MIAMI, FL 33189-2117

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box No 22

City and State 23

Zip Code 24

Date Incorporated or Qualified To Do Business in Florida: 02/13/1981

FEI Number: 59-2073342

FEI Number Applied For
FEI Number Not Applicable

Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
P	MACDOUGALL, EDWARD P	7955 S.W. 201 TERR.	MIAMI, FL	00000
V/P	DOSTALER, FRANCIS P.	19710 WHISPERING PINES	MIAMI, FL.	

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

MACDOUGALL, EDWARD P.
7955 S.W. 201 TERR.
MIAMI, FL 33189

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL.

Zip Code 85

DATE

Registered Agent Accepting Appointment

Date 8-8-90

Edward P MacDougall Pres

305 252-1873

$5 Additional Fee Required for Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

291791

FL DEPT. OF STATE
DIV. OF CORPORATIONS
TALLAHASSEE, FLORIDA
FILED

FILING FEE OF $61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation

DOCUMENT #F17975 (6)

ZIP + 4 PRESORT

PICKUP:
ALL-DADE INSURANCE, INC.
7955 S.W. 201 TERR.
MIAMI, FL 33189-2117

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. If Address in Block 1 is incorrect in any way, enter the address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21. Street Address

22. P.O. Box No.

23. City and State

24. Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 02/13/1981

4. FEI Number: 59-2073342

FEI Number Applied For

FEI Number Not Applicable

5. $8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DES

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
P	MACDOUGALL, EDWARD P	7955 S.W. 201 TERR.	MIAMI, FL 00000
V/P	DOSTALER, FRANCIS P.	19710 WHISPERING PINES	MIAMI, FL.

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent:

MACDOUGALL, EDWARD P.
7955 S.W. 201 TERR.
MIAMI, FL 33189

8. Name and Address of New Registered Agent

8A. Name

8B. Street Address (Do NOT Use P.O. Box Number)

8C. Street Address 2 (Do NOT Use P.O. Box Number)

8D. City: FL.

8E. Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors.

I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
(Registered Agent Accepting Appointment)

I hereby certify that I am authorized to sign this annual report or supplement to annual report, that all applicable fees have been paid, and that I am familiar with the facts herein and that such facts are true.

SIGNATURE: [signature] DATE: 4-6-91

Edward P. MacDougall Pres. 305 252873

FILING FEE OF $61.25 REQUIRED – Make Checks Payable To: *Secretary of State* $8.75 Additional Fee Required for a Certificate of Status

DO NOT DETACH THIS STUB

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION ANNUAL REPORT 1992

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
SEC. OF STATE
CORPORATIONS DIV
TALLAHASSEE, FLA
FILED

FILING FEE $61.25 Make Payable To: Secretary of State

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation DOCUMENT # F17975 (6)

ALL-DADE INSURANCE, INC.
7955 S.W. 201 TERR.
MIAMI FL 33189-2117

2. If Address in Block 1 is Incorrect in any way, line through the incorrect information and enter the correct address below.

21 Mailing Address

22 P.O. Box No.

23 City and State | 24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida 02/13/1981

Line through the incorrect information and enter correct address in Block 2

1a. Date of Last Report	4. FEI Number	FEI Number Applied For / FEI Number Not Applicable	5. $8.75 Additional Fee Required for a Certificate of Status
04/17/1991	59-2073342		CERTIFICATE OF STATUS DESIRED

6. Name and Street Address of Each Officer and Director

1	2 Name of Officers and Directors	3 Street Address of Each Officer and Director (DO NOT Use Post Office Box Numbers)	4 City and State
P	MACDOUGALL, EDWARD P	7955 S.W. 201 TERR.	MIAMI, FL 00000
V/P	DOSTALER, FRANCIS P.	19710 WHISPERING PINES new address 8731 SW 188 St	MIAMI, FL. Miami Fl 33157

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

MACDOUGALL, EDWARD P.
7955 S.W. 201 TERR.
MIAMI, FL 33189

8. Name and Address of New Registered Agent

81 Name

82 Street Address (DO NOT Use P.O. Box Number)

83 Street Address

84 City FL. | 85 Zip Code

9. [illegible]

Registered Agent's Signature DATE

10. [illegible] Yes No ✓

11. [illegible]

SIGNATURE

Edward P MacDougall Pres 305 252-1373

. . . . File Now. Filing Fee after May 1 is $225.00

CORPORATION
ANNUAL REPORT
1993

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FEB 19 93

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

1. Name and Mailing Address of Corporation DOCUMENT # F17975 (6)

ALL-DADE INSURANCE, INC.
7955 SW 201ST TER
MIAMI FL 33189-2117

DO NOT WRITE IN THIS SPACE

If any address is changed or omitted, type through corrected information and write correction in Block 2

3. Date Incorporated or Qualified: 02/13/1981
3a. Date of Last Report: 03/13/1992

FILING FEE $200.00
ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

4. FEI Number: 592073342

2. Mailing Address
21
Street, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Principal Place of Business
26
Street, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

5. Certificate of Status Desired ☐ $6.75

6. Early Bird Campaign Reporting Trust Fund Contribution ☐ $5.00 Will Be Added to Fund

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $138.75 Total Filing Fee Not Applicable

8. This corporation has been authorized to conduct business in Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MACDOUGALL, EDWARD P.
7955 S.W. 201 TERR.
MIAMI FL 33189

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code 86 County

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby appoint the new registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Authorized Signature of New Registered Agent DATE

12. OFFICERS AND DIRECTORS

P
MACDOUGALL, EDWARD P
7955 S.W. 201 TERR.
MIAMI, FL 00000

V/P
DOSTALER, FRANCIS P.
8731 SW 188 ST.
MIAMI FL

13. OFFICERS AND DIRECTORS CHANGES

51 TITLE
52 NAME
53 ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 ADDRESS
64 CITY-ST-ZIP

71 TITLE
72 NAME
73 ADDRESS
74 CITY-ST-ZIP

81 TITLE
82 NAME
83 ADDRESS
84 CITY-ST-ZIP

91 TITLE
92 NAME
93 ADDRESS

14. SIGNATURE

2-9-93

ED MACDOUGALL PRES.

305 2521873

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1994

APPROVED

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

F17975 (6)

1. Name

ALL-DADE INSURANCE, INC.

Principal Place of Business

7955 S.W. 201 TERR.
MIAMI FL 33189

~~7955 S.W. 201 TERR.~~
~~MIAMI FL 33189~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
02/13/1981	02/19/1993

4. FEI Number
59-2073342

5. Certificate of Status Desired
$8.75

7. Supplemental Fee

6. Election Campaign Financing Trust Fund Contribution
$5.00 May Be Added to Fee

8. This corporation has liability for intangible tax under Florida Statutes. ☐ Yes ☑ No

2a. Principal Mailing Address

26 18151 SW 98 COURT

27

28 MIAMI FL

29 33157 30 DADE

25

9. Name and Address of Current Registered Agent

MACDOUGALL, EDWARD P.
7955 S.W. 201 TERR.
MIAMI FL 33189

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85

11 ... Sections 607.0502 and 617.0502, Florida Statutes, the above named corporation submits this statement ... authorized by the corporation's board of directors ... Section 607.0505 or 617.0505, Florida Statutes.

DATE

12

P
MACDOUGALL, EDWARD P
7955 S.W. 201 TERR.
MIAMI, FL 00000

V/P
DOSTALER, FRANCIS P.
8731 SW 188 ST.
MIAMI FL

13. CHANGES TO OFFICERS AND DIRECTORS IN

SIGNATURE: [signature]

2-7-94 3052521873

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APPROVED AND FILED

1995 DEC 13 AM 8:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F17975

Name

ALL-DADE INSURANCE INC.

300001703153
-01/31/96--01083--021
****375.00 ****375.00

Principal Place of Business

18151 SW 98 COURT
MIAMI, FLA 33157

If these addresses are incorrect in any way, line through incorrect information and enter correction below

2. Address, if Applicable

3. New Principal Office Address, if Applicable

Suite, Apt. #, etc.

City & State

County | Zip | Country

DO NOT WRITE IN THIS SPACE

4. Date Incorporated or Qualified To Do Business in Florida
2-13-81

5. FEI Number
59-2073342

CERTIFICATE OF STATUS DESIRED [ ]
$8.75 Additional Fee required for a Certificate of Status

Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City - State - Zip
Pres. MACDOUGALL, EDWARD P. 7955 SW 201 TERRACE MIAMI, FL. 33189	7955 SW 201 TERRACE	MIAMI, FL 33189
V/P DOSTALER, FRANCIS P.	8731 SW 188ST	MIAMI, FL. 33187

8. Name and Address of Current Registered Agent

EDWARD P. MACDOUGALL
7955 SW 201 TERRACE
MIAMI, FL. 33189

9. Name and Address of New Registered Agent

Name

Office Address (P.O. Box Number is Not Acceptable)

City

SCC 12-13-95

State: FL | Zip Code

Date 12.11.95

CERTIFICATE OF DESIGNATION

If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status check this box [ ]

Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes [ ] No [X]

305-

EDWARD P. MACDOUGALL, Pres 12.11.95 252873