

N00000003088

TRANSMITTAL LETTER

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

500003005245--5
-10/05/99--01021--007
*****70.00 *****70.00

SUBJECT: SURETY VENTURES, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: THOMAS LEWIS
Name (Printed or typed)
7099 OX BOW ROAD
Address
TALLAHASSEE, FL 32312
City, State & Zip
(850) 891-6510
Daytime Telephone number

FILED
99 OCT -5 PM 12: 21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

TS10/8/99



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 10, 2000

THOMAS LEWIS
7099 OX BOW RD
TALLAHASSEE, FL 32312

SUBJECT: SURETY VENTURES, INC.

This letter will confirm that due to a clerical error the above referenced corporation was incorrectly filed as a PROFIT(P99000089071) corporation. Please be advised, we have corrected our records to reflect this corporation as a NON PROFIT corporation and assigned new document number N00000003088 with the original file date of October 5, 1999.

Any annual reports/uniform business reports submitted this office should reflect the new document number.

We sincerely apologize for any inconvenience this error may have caused you.

Should you have any questions please feel free to contact this office at the address indicated below.

Sincerely,
RoseAnn Varnadore
Corporate Specialist Supervisor
New Filings Section

Letter number: 200A00026102

ARTICLES OF INCORPORATION

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I — Name of Corporation

The name of the corporation shall be *Surety Ventures, Inc.*

ARTICLE II — Principal Place of Business and Mailing Address

The corporation's principal place of business and mailing address is:

7099 Ox Bow Road
Tallahassee, Florida 32312

ARTICLE III — Purpose(s) of Corporation

The purpose of the corporation is to provide educational experiences for students through hands-on training and financial support in the field of insurance, under the supervision of trained faculty. Any profits realized from these activities will be granted as an education gift to the academic program providing the service.

ARTICLE IV — Manner of Election of Directors

The Directors of the Corporation are appointed, as stated in the by laws

ARTICLE V — Limitation of Corporate Powers

ARTICLE VI — Initial Registered Agent and Street Address

The name of the initial registered agent is:

Thomas Lewis

The street address of the initial registered agent is:

7099 Ox Bow Road
Tallahassee, Florida 32312

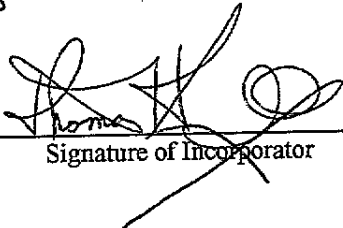
FILED
99 OCT -5 PM 12:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII — Information on Incorporators

The names and the street addresses of the incorporators for these articles of incorporation are:

<u>Name</u>	<u>Address</u>
Thomas Lewis	7099 Ox Bow Road Tallahassee, Florida 32312
Belinda Matingou	535 Regency Park Drive Atlanta, Georgia 30331
Victor Fields	c/o Charlotte Observer 600 South Tryon Street Charlotte, North Carolina 28202

The undersigned incorporator has executed these Articles of Incorporation this 2 day of September, 1999.



Signature of Incorporator

Thomas Lewis

Typed Name of Incorporator Signing

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

SURETY VENTURES, INC.

(must include suffix)

2. The name and address of the registered agent and office is:

Thomas Lewis

(NAME)

7099 Ox Bow Road

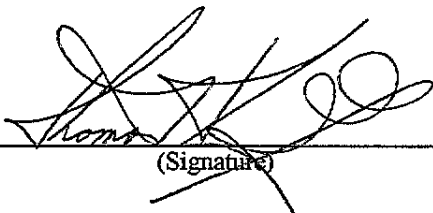
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Tallahassee, Florida 32312

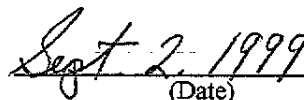
(CITY/STATE/ZIP)

FILED
99 OCT -5 PM 12: 21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Signature)



(Date)