

NO8000005168

BAH
c/o Excelcor Benefit
700 W Hillsboro Blvd #4-100
Deerfield Bch, FL
3344

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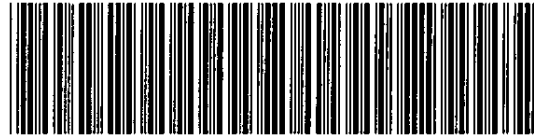
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

cf. 5-29

ARTICLES OF INCORPORATION

OF

BROWARD ASSOCIATION OF HEALTH UNDERWRITERS, INC.

FILED

2008 MAY 29 PM 4:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE ONE
NAME

The name of the corporation is Broward Association of Health Underwriters, Inc., a non-profit corporation.

ARTICLE TWO
PRINCIPAL OFFICE

The principal place of business and the mailing address of the corporation is 700 Hillsboro Boulevard, Suite 4-100, Deerfield Beach, FL 33441

ARTICLE THREE
PURPOSE

The purposes for which the corporation is organized are:

1. To place the sale and service of health insurance and /or disability insurance upon the highest possible plane.
2. To advance public knowledge for the need and benefits of health insurance and/or disability insurance.
3. To provide and promote a program of continuing education and self-improvement for its members.
4. To be active, as an association, in public affairs and to encourage its members to support and contribute to community activities.
5. To promote the Code of Ethics of the National Association of Health Underwriters.

ARTICLE FOUR
MANNER OF ELECTION

The officers of the corporation shall be a president, president-elect, vice presidents, and secretary/treasurer who shall be elected and serve in the manner prescribed in the by-laws.

ARTICLE FIVE
DIRECTORS

There shall be four members of the initial Board of Directors. The names and addresses of the persons who are to serve as directors are as follows:

Tonya Draughon President	c/o Renaissance Life & Health Insurance 12555 Orange Drive, Suite 214 Davie, FL 33330
Marie Dotson Secretary/Treasurer	c/o Excelsior Benefits, LLC 700 W Hillsboro Boulevard, Suite 4-100 Deerfield Beach, FL 33441
Kevin Farrell Immediate Past President	c/o Aetna 4322 Danielson Drive Lake Worth, FL 33467-3628
Corey Mershon President-Elect	533 NW 3 Ave #444 Fort Lauderdale, FL 33301

ARTICLE SIX
REGISTERED OFFICE

The street address of the registered office of the corporation is 12555 Orange Drive, suite 214, Davie, FL 33330, and the name of the initial registered agent at such address is Tonya D. Draughon.

ARTICLE SEVEN
INCORPORATORS

The name and address of the incorporator is Tonya Draughon whose address is 12555 Orange Drive, Suite 214, Davie, FL 33330.

ARTICLE EIGHT
MEMBERS

The corporation shall have members. Members of the corporation shall be those persons who belong to the Florida Association of Health Underwriters and who pay annual dues as prescribed by the by-laws. The by-laws may provide for the termination of membership in the corporation for non-payment of dues, or other cause, after hearing.

ARTICLE NINE
BY-LAWS

The by-laws of the corporation are to be made, altered or rescinded by the members of the corporation.

ARTICLE TEN
AMENDMENT TO ARTICLES

These Articles of Incorporation may be amended by the act of the members of the corporation. Such amendments may be proposed and adopted in the manner provided in the by-laws of the corporation.

ARTICLE ELEVEN
CORPORATE POWERS

This corporation shall have the powers as stated in its Articles of Incorporation and such powers as are now or may be granted hereafter by statute.

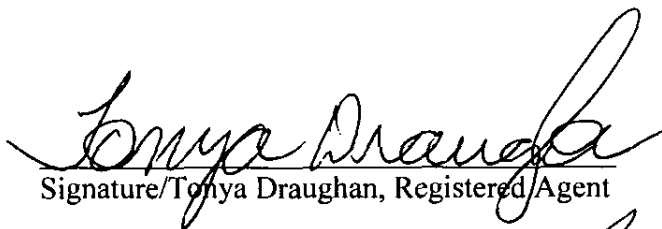
No income that the corporation may receive shall be in any manner distributed to its members except in payment for services rendered to the corporation.

ARTICLE TWELVE
INDEMNIFICATION

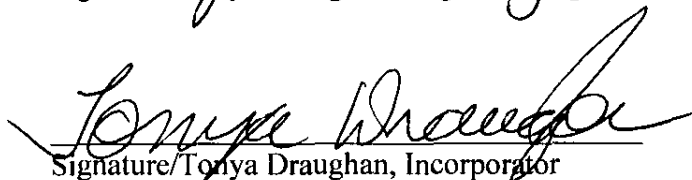
The private property of the members of this corporation shall not be liable for the debts of this corporation but shall be wholly exempt therefrom.

The corporation may indemnify any director or officer of the corporation for any liability, including attorney fees and costs, that may be incurred by such individual as a result of such director's or officer's proper acts in furtherance of the corporation's purpose.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.


Signature/Tonya Draughan, Registered Agent

4/30/2008
Date

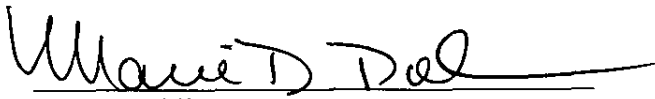

Signature/Tonya Draughan, Incorporator

4/30/2008
Date

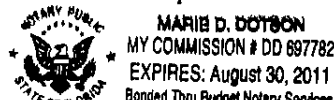
STATE OF FLORIDA
COUNTY OF BROWARD

On this 30th day of April, 2008, before me, the undersigned authority, personally appeared Tonya Draughan, known to me to be the person whose name is subscribed to the within instrument and acknowledged that he executed the same for the purposes contained.

IN WITNESS WHEREOF, I hereunto set my hand and seal.


Notary Public
State of Florida

My Commission expires:



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