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Requestor's Name				
Address				
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CORPORATION(S) NAME

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ARTICLES OF INCORPORATION	SECRETARY	00 FEB -9	Chebras Albanas P E
of Ty Insurance Agency, Inc.	Y OF STA	AH II: 3	THE VENT
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RE-liabilit

(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: RE-liability 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.

ARTICLE IV- CAPITAL STOCK

The corporation is authorized to issue	` one hundred	_shares (100) of Ten
Dollar(s) (\$ 10.00) par val	ue Common Stock, which	h shall be designat	ted "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	Mr. Richard H. Byron		
ADDRESS	2150 South Andrews Avenue		
CITY	Fort Lauderdale,	FLORIDA	ZIP 33316

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

NAME	RE-liability Insurance Agency,	Inc.	·
ADDRESS	2150 South Andrews Avenue		
СПҮ	Fort Lauderdale,	FLORIDA	ZIP 33316

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have	three	(3,	directors initially. The number of directors may be either
increased or diminished from t	lime to time by t	he By-Law	5. but shall never be less than one (1). The names and addengered
of the initial director(s) of the	corporation are:	as follows:	

·				
NAME	Richard H. Byron			
ADDRESS	2150 South Andrews Avenue			
CITY	Fort Lauderdale	STATE	Florida	ZIP 33316
NAME	Edwin J. Calabrese			
ADDRESS	2150 South Andrews Avenue			
CITY	Fort Lauderdale	STATE	Florida	ZIP 33316
NAME	William N. Simons			
ADDRESS	2150 South Andrews Avneue			
CITY	Fort Lauderdale	STATE	Florida	ZIP 33316

ARTICLE VI I - INCORPORATORS

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

NAME	Richard H. Byron			
ADDRESS	2150 South Andrews Avenue			
CITY	Fort Lauderdale	STATE	Florida	ZIP 33316
NAME	Edwin J. Calabrese			211 33310
ADDRESS	2150 South Andrews Avenue			
CITY	Fort Lauderdale	STATE	Florida	ZIP 33316
NAME	William N. Simons			2.12
ADDRESS	2150 South Andrews Avenue		 	
CITY	Fort Lauderdale	STATE	Florida	ZIP 33316

IN WITNESS WHEREOF,	, the undersigned s	subscriber(s) have execute	d those Artic	cles of Incompanies which	8th	
day of <u>February</u>	KSK 2000			eres or meorpotation tims		 _

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CERTIFICATE AND KNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT OF

RE-liability 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 _ 2150 South Andrews Avenue

Fort Lauderdale, Florida 33316

has named Mr. Richard H. Byron

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)