P0000034593

DATE 3/28/00

HÄSSEE, FLORIDA

MR 31 PH 12: 20
RETARY OF STATE

SECRETARY OF STATE CORPORATION DIVISION STATE OF FLORIDA TALLAHASSEE, FL 32304

RE: EDWARD POLLARD INSURANCE AGENCY, INC.

GENTLEMEN:

ENCLOSED HEREWITH ARE THE ARTICLES OF INCORPORATION TOGETHER WITH

A COPY OF SAID ARTICLES FOR EDWARD POLLARD INSURANCE AGENCY, INC.

OUR CHECK IN THE AMOUNT OF \$70.00 INCLUDES THE FOLLOWING:

FILING FEE

CHARTER TAX

REGISTERED AGENT

TOTAL: \$ 70.00

000003192100--0 -03/31/00--01080--022 *****70.00 ******70.00

RESPECTFULLY SUBMITTED,

Edward Pollard

SIGNER'S NAME:

EDWARD POLLARD

ADDRESS:

431 N FEDERAL HIGHWAY POMPANO BEACH, FL 33062

DAYTIME PHONE:

954-781-5444

)0 MAR 31 PM 12: 2 SECRETARY UF STAT

ARTICLES OF INCORPORATION

OF

EDWARD POLLARD INSURANCE AGENCY, INC.

ARTICLE I NAME

The name of the corporation shall be EDWARD POLLARD INSURANCE AGENCY, INC.

ARTICLE II PURPOSE

The corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III CAPITAL STOCK

The maximum number of shares of capital stock that this corporation is authorized to have outstanding at any one time is TEN THOUSAND (10,000) shares of common stock, having a par value of ONE (\$1.00) DOLLAR PER SHARE.

The amount of capital with which this corporation will begin business shall be the sum of not less than FIVE HUNDRED (\$500.00) DOLLARS.

ARTICLE IV DURATION

This corporation shall exist perpetually unless sooner dissolved according to law.

ARTICLE V INITIAL REGISTERED AGENT

The name and address of the initial registered agent is:

EDWARD POLLARD 5204 NW 67 AVENUE LAUDERHILL, FL 33319

ARTICLE VI INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

EDWARD POLLARD 5204 NW 67 AVENUE LAUDERHILL, FL 33319

ARTICLE VII PRINCIPAL OFFICE

The initial street address of the principal office of the corporation shall be:

431 N FEDERAL HIGHWAY POMPANO_BEACH, FL 33062

ARTICLE VIII. DIRECTORS

The number of Directors of this corporation shall be at least one (1) and no more than ten (10).

The name and street address of the member of the first Board of Directors of this Corporation is as follows:

EDWARD POLLARD
5204 NW 67 AVENUE
LAUDERHILL, FL 33319

ARTICLE IX SUBSCRIBER

The name and address of the person signing these Articles of Incorporation as subscriber is as follows:

EDWARD POLLARD
431 N FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

IN WITNESS WHEREOF, the undersigned, Edward Pollard, competent to contract, has hereunto set his hand and seal this 28 day of March ,2000.
STATE OF FLORIDA COUNTY OF BROWARD
BEFORE ME, the undersigned Notary Public of the State of Florida, personally appeared Edward Pollard, known to me to be the individual described in and who executed the foregoing Articles of Incorporation, who acknowledged before me that he executed the same freely and voluntarily for the purpose therein expressed.
(Check He is personally known to me. One) He provided the following type of identification:
WITNESS my hand and official seal this <u>28</u> day of <u>maker</u> ,

OFFICIAL NOTARY SEAL
MELODY R LAVRICH
COMMISSION NUMBER
CC639679
MY COMMISSION EXPIRES
APR. 17,2001

Notary Seal:

My commission expires:

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

IN COMPLIANCE WITH SECTION 607.325, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST THAT EDWARD POLLARD INSURANCE AGENCY, INC.
WITH ITS PLACE OF BUSINESS AT 431 N FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

HAS NAMED EDWARD POLLARD LOCATED AT 5204 NW 67 AVENUE LAUDERHILL, FL 33319

CITY OF LAUDERHILL, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE Club (Corporate Officer)

TITLE PRESIDENT

DATE 3/28/00

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE (Registered Agent)

DATE 3/28/00

BUREAU OF CORPORATE RECORDS, P.O. BOX 6327, TALLAHASSEE, FL 32314