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TRANSMITTAL LETTER

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 APR 10 PM 4: 12

APPROVED,
AND
FILED

SUBJECT: American Safety & Loss Control Institute
(Proposed corporate name - must include suffix)

200003202552--8
-04/11/00--01004--004
*****70.00 *****70.00

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 of
Status

ADDITIONAL COPY REQUIRED

RECEIVED

00 APR 10 PM 4: 03

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FROM: Hal Morrow
Name (Printed or typed)

P.O. Box 50781
Address

Jacksonville, Florida 32240
City, State & Zip

904-241-5052
Daytime Telephone number

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

of the common shares shall have unlimited voting rights and the right to receive the net assets of the corporation upon its dissolution.

All corporate powers shall be exercised by or under the authority of, and the business and affairs of this corporation shall be managed under the direction of, the shareholders of this corporation.

ARTICLE VI

No shareholder shall have the preferential or preemptive right to subscribe for or to purchase any shares of any class, any rights, warrants, or options with respect thereto, or any obligation convertible into or exchangeable for any such shares or other securities whether out of unissued shares or other securities or out of shares or other securities acquired by the corporation after the issue thereof, regardless of the consideration therefor.

ARTICLE VII

The corporation shall indemnify to the fullest extent permitted by the Florida Business Corporation Act any person who has been made, or is threatened to be made, a party to an action, suit, or proceeding, whether civil, criminal, administrative, investigative, or otherwise (including an action, suit or proceeding by or in the right of the corporation), by reason of the fact that the person is or was a director or officer of the corporation, or a fiduciary within the meaning of the Employee Retirement Income Security Act of 1974 with respect to an employee benefit plan of the corporation, or serves or served at the request of the corporation as a director, or as an officer, or as a fiduciary of an employee benefit plan, of another corporation, partnership, joint venture, trust or other enterprise. In addition, the corporation shall pay for or reimburse any expenses incurred by such persons who are parties to such proceedings, in advance of the final disposition of such proceedings, to the full extent permitted by the Florida Business Corporation Act.

ARTICLE VIII

The Florida Control-Share Acquisition sections of the Florida Business Corporation Act (§§ 607.0901 through 607.0903) shall not be applicable to this corporation.

ARTICLE IX

The bylaws of the corporation may be amended by majority vote of either the directors or the shareholders.

ARTICLE X

The number of directors of the corporation shall be fixed by the bylaws of the corporation. The initial board of directors shall consist of two (2) directors whose name and addresses are as follows:

Hal Morrow
Post Office Box 50791
Jacksonville, FL 32240

James S. Borr
2110 Savannah Oaks Lane
Apopka, FL 32703

ARTICLE XI

The name and address of the registered agent for this corporation are: Hal Morrow, 316-A Eighth Street, Atlantic Beach, FL 32233.

ARTICLE XII

The name and address of the incorporator to these Article of Incorporation is Hal Morrow, Post Office Box 50791, Jacksonville, FL 32240

The undersigned incorporator has executed these Articles of Incorporation this 3 day of February, 2000.



Hal Morrow, Incorporator

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

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

THAT THE AMERICAN SAFETY & LOSS CONTROL INSTITUTE, INCORPORATED DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF JACKSONVILLE, STATE OF FLORIDA, HAS NAMED HAL MORROW, 316-A EIGHTH STREET, ATLANTIC BEACH, FLORIDA 32233, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA

SIGNATURE 
Hal Morrow

TITLE President

DATE 2-3-00

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.

SIGNATURE 
Hal Morrow

DATE: 2-3-00

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AND
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00 APR 10 PM 4: 12
SECRETARY OF STATE
TALAHASSEE, FLORIDA