- POSSOSS39024

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 UD APR 12 AH 8:45

SUBJECT:	West Coast Insurance Brokers, Inc.			
	(Proposed corpo	rate name - must include sui	4000013210 -04/12/00-	
Enclosed is an origin	al and one(1) copy of the article	es of incorporation and a	a check for :	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Name (Pr 314 - 6th Aven	inted or typed) ue North, Suite A		
	Tierra Ver	de, FL 33715 State & Zip		
		867–5325	· · · · · · · · · · · · · · · · · · ·	

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

Articles of Incorporation

ODAPR 12 AM 8:46

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

Article I. Name

The name of the corporation shall be:

West Coast Insurance Brokers, Inc.

Article II. Principal Office

The principal place of business and mailing address of the corporation shall be:

314 – 6th Avenue North, Suite A Tierra Verde, FL 33715

Article III. Shares

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 common shares at \$1 par value.

Article IV. Initial Registered Agent and Street Address

The name and Florida street address of the initial registered agent are:

O. Larry Combs 314 – 6th Avenue North, Suite A Tierra Verde, FL 33715

Article V. Incorporator

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

O. Larry Combs 314 – 6th Avenue North, Suite A Tierra Verde, FL 33715

Incorporator: O. Larry Combs

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 statues 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.

Registered Agent: O. Larry Combs

Date

APR 12 Ail 8:46