Florida Department of State

Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000021460 1)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

: (305)541-3694

Phone Fax Number

: (305)541-3770

00 APR 28 PM 2: 34
SECRETARY OF STATE
ARASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

ALLIANCE RISK MANAGEMENT SERVICES, INC,

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

HOOOOO 21460 ARTICLES OF INCORPORATION

υf

Alliance Risk Management Services, Inc.

(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	Do	0	
The name of the corporation is:		0	
Alliance Risk Management Services, Inc.	AH	APR	
	155 781	28	September 1
ARTICLE II - DURATION	ئار 13 13 جالار	2 분의	
This corporation shall exist perpetually unless dissolved according to Florida law.	TATE OKIDA	$\frac{\omega}{z}$	

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 one dollar Dullar(s) (\$ 1.00) par value Common Stock, which shall be designated "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 Jo-Anne Conlon		
ADDRESS 2300 Glades Road Suite 200	W	
City Boca Raton,	FLORIDA Florida	ZIP 33431

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

NAME		Allianc	e Risk	Manag	ement	Services,	Inc.	
ADDRESS	2300	Glades	Road,	Suite	200W			
	Boça Ra	ton				FLORIDA		ZIP 33431

SANDRA ALLAN - ENROLLED AGENT 2553 BESSIE ST DELRAY BEACH, FLORIDA, 33444 561-997-7979

H00000021460

09h1200000H

	NITIAL BOARD OF DI		
This corporation shall have TWO (increased or diminished from time to time by the By of the initial director(s) of the corporation are as follows:	-Laws, but shall never	hially. The number of di be less than one (1). Th	rectors may be either e names and addresses
Chain Wilking			
NAME R. Chris Wilkins ADDRESS 2300 Glades Road, Suite	200W		
	STATE	Florida	ZIP 33431
			•
The same same suit	e 200W		
	STATE	Florida	zip 33431
NAME			
OTTY	STATE		ZIP
NAME R. Chris Wilkins	2000		
ADDRESS 2300 Glades Road, Suit	18 200W	•	_
CHY Boca Raton	STATE	Florida	zir 33431
NAME Jo-Anne Conion	-0 200 W		
ADDRESS 2300 Glades Road, Suit	se 200 W		
UTTY Boca Raton,	STATE	Florida	ZIP 33431
NAME			
ADDRESS			
CITY	STATIS		ZIP
1N WITNESS WHEREOF, the undersigned subscrittay of April 2000	ber(s) have executed the	tese Articles of Incorpor	ation this28
H00000021460		the hill	(Scal)
			(Scal)

CERTIFICATE AND KNOWLEDGEMENT
OF REGISTERED AGENT

SECNETION

PM 2: 34

CERTIFICATE OF REGISTERED AGENT OF

Alliance Risk Management	Services, Inc.	
(name of corporatio	n)	

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	2300 Glades Road, Suite 200W				
	Boca Raton, Florida, 33431				
has named _	Jo-Anne Conlon				
located at th	ne 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.

400000021460

202 24I 3550

EMPIRE CORP

12:00 MAY-02-2000