P0000052489

TRANSMITTAL LETTER

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

Subject: Robert Johnson Insurance, Inc.

Enclosed are an original and one (1) copy of the Articles of Incorporation and a check for \$78.75, for filing fees and a certified copy.

From:

Robert C Johnson 2043 Hawkcrest Drive East Jacksonville, Florida 32259

EFFECTIVE DATE

00 MAY 22 AM 10: 06
SECRETARY OF STATE
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______C___COO

ARTICLES OF INCORPORATION

In Compliance with Chapter 607 and/or Chapter 621, F.S.(Profit

ARTICLE I:

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The name of this corporation is:

"ROBERT JOHNSON INSURANCE, INC."

ARTICLE II:

The principal office and mailing address of the corporation will be at 2043 Hawkcrest Drive East, Jacksonville, Florida, 32259.

ARTICLE III:

The general nature of the business or businesses to be transacted is as follows:

To transact any lawful business and to exercise all powers granted to corporations by the laws of the State of Florida.

ARTICLE IV:

The maximum number of shares with par value that this corporation is authorized to have outstanding at any one time is one thousand (1000) shares of the par value of one and no/100 dollars (\$1.00) each.

ARTICLE V:

The number of its directors shall be one (1) or such other number as the shareholders may from time to time designate but never less than one (1). The name and address of the members of the first board of directors, who shall hold office for the first year of the existence of the corporation or until their successors are elected or appointed and have qualified are:

President, Secretary, and Treasurer

NAME

ADDRESS

Robert C Johnson

2043 Hawkcrest Drive East Jacksonville, Florida 32259

ARTICLE VI:

The name of the initial registered agent of this corporation at that address is Robert C Johnson and the street address of the initial registered agent of this corporation is 2043 Hawkcrest Drive East, Jacksonville, Florida, 32259.

ARTICLE VII:

The name and address of the Incorporator of the Articles of Incorporation is Robert C Johnson and the street address of the Incorporator is 2043 Hawkcrest Drive East, Jacksonville, Florida, 32259.

ARTICLE VIII:

This corporation is to have perpetual existence. Corporate existence shall commence effective June 1, 2000.

ARTICLE VIIII:

This corporation reserves the right to amend, alter, change or repeal any provision contained in its articles of incorporation, in the manner now or hereafter prescribed by statute, and all rights conferred upon stockholders herein are granted subject to this reservation.

ONAY 22 AND. OF ARIASSEE, FLORION

I, THE UNDERSIGNED, being the Incorporator herein-before named for the purpose of forming a corporation to do business both within and without the State of Florida, do make, subscribe, acknowledge, and file these articles, hereby declaring and certifying that the facts herein stated are true, and accordingly have hereunto set my hand and seal this ______ day of May 2000.

> Sho Capperson Robert C Johnson

STATE OF FLORIDA)

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COUNTY OF DUVAL)

day of May 2000, personally came before me, a BE IT REMEMBERED, that on this _/8** Notary Public for the State of Florida, ROBERT C JOHNSON party to the foregoing Articles of Incorporation, known to me personally to be such and who did not take an oath, and who acknowledged the said Articles to be the act and deed of the signers and that the facts therein stated are truly set forth.

GIVEN under my hand and seal of office the day and year aforesaid.

Name:

Rita B. Gallegos August 11, 2003 BONDED THRU TROY FAIN INSURANCE INC.

My Commission Expires: 8/11/2003
My Commission Number is: CC 85 4422

CERTIFICATE NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Chapter 48.091, Florida Statutes, the following is submitted.

That ROBERT JOHNSON INSURANCE, INC., a corporation duly organized and existing under the laws of the State of Florida, has named ROBERT C JOHNSON as its Registered Agent, located at 2043 Hawkcrest Drive East, Jacksonville, Florida, 32259, to accept service of process within Florida.

Having been named to accept service of process for the above-stated corporation, at the place designated in this Certificate, I hereby accept to act in this capacity and agreed 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 607.0505, Florida Statutes.

Robert C Johnson

00 MAY 22 AM IO: 06
SECRE LARY OF STATE
TALL AHASSEE, FLORID