

Harvey J. Spinowitz, P.A., Attorneys at Law
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FILED
00 MAY 30 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 25, 2000

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

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Re: INSURANCE FOR PROFESSIONALS, INC.

To Whom it May Concern:

I enclose an original and one (1) copy of the Articles of Incorporation and Certificate of Designation of Registered Agent/Registered Office, along with a check in the amount of \$87.50. (filing fee, certified copy, and certificate)

Please send conformed copies back to us in the enclosed stamped envelope.

Very truly yours,



Harvey J. Spinowitz

HJS/tm
Enclosures

D. BROWN JUN - 8 2000

**ARTICLES OF INCORPORATION
OF
INSURANCE FOR PROFESSIONALS, INC.**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. CORPORATE NAME.

The name of this corporation is Insurance for Professionals, Inc.

ARTICLE II. PRINCIPAL OFFICE.

The principal place of business and mailing address of this corporation are 1395 Oak Hill Drive, Unit 103, Dunedin, FL 34698.

ARTICLE III. CAPITAL STOCK.

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of one (\$1.00) per share.

ARTICLE IV. INITIAL REGISTERED AGENT AND OFFICE.

The name and address of the initial registered agent are Harvey J. Spinowitz, 1421 Court St., Suite C, Clearwater, Florida 33756.

ARTICLE V. INCORPORATORS.

The name(s) and street address(es) of the incorporator(s) of these articles of incorporation are Harvey J. Spinowitz, 1421 Court St., Suite C, Clearwater, Florida 33756.

The undersigned has executed these articles of incorporation on this 25th day of May 2000.


Harvey J. Spinowitz

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA


Pursuant to the provisions of F.S. 607.0501, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent in the State of Florida.

1. The name of the corporation is Insurance for Professionals, Inc.
2. The name of the registered agent is Harvey J. Spinowitz.
3. The address of the registered agent/registered office is 1421 Court St., Suite C, Clearwater, Florida 33756.

Acceptance

Having been named as registered agent and designated to accept service of process for the above corporation, 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 statutes 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.

Dated: May 25, 2000


Harvey J. Spinowitz