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28 June 2000

**EFFECTIVE DATE**  
7-1-00

**FILED**  
JUL -6 AM 8:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Subject: Filing of Articles of Incorporation of  
Harvey Insurance Agency, Inc.

200003315362--6  
-07/06/00--01093--005  
\*\*\*\*122.50 \*\*\*\*\*78.75

Dear Reader:

Enclosed please find an original articles of incorporation for the above for profit corporation and a check totaling \$122.50 for the filing fee (\$35), the designation and acceptance of the resident agent (\$35), and for a certified copy (52.50) of the articles.

Please return the certified copy to this office in the stamped, return envelope provided for your convenience.

Thank you.

Sincerely,

  
Timothy Keyser

TK/mdw  
enclosures  
c: Client

**EFFECTIVE DATE**  
7-1-00

**FILED**  
00 JUL -6 AM 8:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION  
OF  
HARVEY INSURANCE AGENCY, INC.**

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act in Chapter 607 of the Florida Statutes, hereby adopt the following Articles of Incorporation.

**ARTICLE I - NAME**

The name of this corporation shall be: **HARVEY INSURANCE AGENCY, INC.**

**ARTICLE II - PRINCIPAL OFFICE**

The principal place of business of this corporation shall be at 105 County Road 315 South, Interlachen, Florida 32148 and the mailing address is: Post Office Box 1854.

**ARTICLES III - SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1000 shares of common stock.

**ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name, street and mailing addresses of the initial registered agent are: Timothy Keyser, 501 Atlantic Avenue, Post Office Box 92, Interlachen, Florida 32148.

**ARTICLE V - INCORPORATORS**

The name, mailing, street and mailing addresses of the incorporators to these Articles of Incorporation are: Lawrence P. Harvey, 105 County Road 315 South, Post Office Box 1854, Interlachen, Florida 32148 and Richard E. Shivery, 105 County Road 315 South, Post Office Box 1854, Interlachen, Florida 32148.

## **ARTICLE VI - DATE OF INCORPORATION**

This corporation's existence shall begin on 1 July 2000.

## **ARTICLES VII - MANAGEMENT BY SHAREHOLDERS**

This corporation shall always have one or more shareholders but shall not have a board of directors in accord with Section 607.0704 of the Florida Statutes. All corporate duties and powers shall be exercised by, and the business and affairs of this corporation, shall be managed under the direction of the shareholders of this corporation.

## **ARTICLE VIII - PREEMPTIVE RIGHTS**

Each initial shareholder shall have preemptive rights to maintain the same proportional amounts of stock in any new or unissued stock except for certain issuances of stock otherwise excluded from preemptive rights by law.

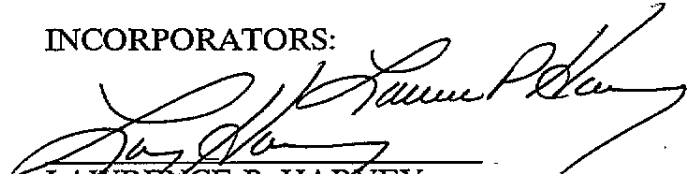
## **ARTICLES IX - RESTRICTIONS ON THE TRANSFER OF STOCK**

Shares held by the initial shareholders or authorized but unissued shares may not be resold or otherwise transferred to other persons unless first offered to the initial shareholders of this corporation. The purposes for any restriction on the transfer of stock shall be only to qualify and maintain this corporation's "S Corporation" status under the United States Internal Revenue Code and future amendments to it and for such other purposes as may be authorized by law. The price and terms at which, and the time within which, shares subject to this restriction may be offered and sold shall be further specified

by written agreement among all of the shareholders and this corporation.

The undersigned has executed these Articles of Incorporation on this 28<sup>th</sup> day  
of June 2000.

INCORPORATORS:

  
LAWRENCE P. HARVEY

  
RICHARD E. SHIVERY

**CERTIFICATE OF DESIGNATION OF  
REGISTERED OFFICE AND AGENT**

Under provisions of section 607.0501 of the Florida Statutes, HARVEY INSURANCE AGENCY, INC., which is organized under the laws of the State of Florida, submits the following statement in designating the registered office and agent in Florida.

1. The name, mailing (and street) address and office of the registered agent is: Timothy Keyser, Post Office Box 92, (501 Atlantic Avenue) Interlachen, Florida 32148.

**HARVEY INSURANCE AGENCY, INC.**

Signature: \_\_\_\_\_

President

Dated on this 28th day of June 2000.

**ACCEPTANCE**

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 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.

Signature: \_\_\_\_\_

Dated on this 28th day of June 2000

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