TRANSMITTAL LETTER Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 S.C.W. HOLDING & INSURANCE, CO. SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$70.00 \$78.75 \$78.75 **⊈**k\$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Joyce Wengert FROM: Name (Printed or typed) 420 S. Waterway Drive Address Satellite Beach, Fl 32937 City, State & Zip

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

321-3693-8343 Daytime Telephone number

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| ARTICLES OF INCORPORATION I. The name of the corporation shall be: S.C.W. HOLDING & INSURANCE, CO. |
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| 1. The name of the corporation shall be: S.C.W. HOLDING & INSURANCE, CO. |
| 2. The principal place of business and mailing address of the corporation is: 420 S. Waterway Dr. Satellite Bch, Fl 32937 |
| 3. The corporation shall have the authority to issue shares of stock. |
| 4. The registered agent of the corporation is |
| 5. The initial Board of Directors shall have <u>1</u> member(s) whose name(s) and address(es) s/are as follows: <u>Joyce Wengert, 420 S. Waterway Dr. Satellite Bch,</u> Fl 32937 |
| The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one. |
| 5. The incorporator of this corporation is |
| Dated 6-3-2000 |

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 am familiar with and accept the obligations of my position as registered agent.

Dated ____6-3-2000

gistered Agent`