FILED SMITTAL LETTER

00 AUG 28 AM 9: 27

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Department of State Division of Corporation P. O. Box 6327 Tallahassee, FL 3231	•		ALLAHASSEE, FLOR	
SUBJECT: B	ig Insurance Ager (Proposed corpo	1 Cy Inc.	ix) 80000337	'49484 :
				01105014 00 *****70.00
Enclosed is an original	al and one(1) copy of the articl	es of incorporation and a	check for:	
图 \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO		
FROM:	HAROLD L. Beni	finited or typed)		
Marie V		Re RoAL		
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DA DA DA	954-981- a Daytime T	A 5 \ elephone number	·	- · · · · -
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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

00 AUG 28 AM 9: 27

<u>ARTICLE I NAME</u>

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The name of the corporation shall be:

BIG INSURANCE AGENCY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 5937 SHERIDAN STREET HOLLYWOOD FL 33021

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ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

ANTONIO BARCENA

5937 SHERIDAN STREET

HOLLYWOOD FL 33021

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

ANTONIO BARCENA

5937 SHERIDAN STREET HOLLYWOOD, FL 33021

Signature/Incorporator

8-25-00

Date

(An additional article must be added if an effective date is requested.)

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 releging 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/Registered Agent

D

Date