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Department of State

TRANSMITTAL LETTER

Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

Sub	ect	Lawson & Associates Insurance Adjusters Inc
Subj	CCL	Lawson & Associates insurance Adjusters inc

Enclosed is an original and two (2) copies of the articles of incorporation and a check for

 S122.50 Siling Fee Siling Fee, Certified Copy & Certificate

(ADDT'L COPY REQ'D) (ADDT'L COPY REQ'D)

FROM:	Nellie R. Akalp	
	30141 Agoura Road, Suite 205	
	Agoura Hills, California 91301	

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DIVISION OF CORPORATIONS

OD NOW - 1 AM 9: 38

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

(C) 11/2/00

ARTICLES OF INCORPORATION OF Lawson & Associates Insurance Adjusters Inc

FILED SECRETARY OF STATE DIVISION OF CORPORATION

00 NOV -1 AM 9:38

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 NAME	
The name of the Corporation shall be: Lawson & As	sociates Insurance Adjusters Inc
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address	of this corporation shall be:
14499 S.W. 112th Cir Dunnellon, Florida 34432	
ARTICLE III SHARES	
The number of shares that this corporation is authori \$1.00 par value per share.	ized to have outstanding at any one time is: 1,500 a
ARTICLE IV INITIAL REGISTERE The name and Florida street address of the initial reg	D AGENT AND STREET ADDRESS gistered agent is:
Denis Lawson 14499 S.W. 112th Cir Dunnellon, Florida 34432	
ARTICLE V INCORPORATOR	na an ing
The name and address of the incorporator to these A	rticles of incorporation is:
Nellie R. Akalp	
30141 Agoura Road, Suite 205 Agoura Hills, California 91301	
- Turier. Allp.	10/25/2000
Nellie R. Akalp, Incorporator	Date
Having been named as registered agent and to accept ser place designated in this certificate, I hereby accept the ap capacity. I further agree to comply with the provisions of performance of my duties, and I am familiar with and acc	ppointment as registered agent and agree to act in this all statutes relating to the proper and complete
ins Vans	10-31-00
Denis Lawson, Registered Agent	Date