

P01000003461

Florida Department of State  
Division of Corporations  
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FLORIDA PROFIT CORPORATION OR P.A.

TAMIAMI INSURANCE II, INC.

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION**

*The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

**ARTICLES I - NAME**

The name of the corporation shall be:

**TAMIAMI INSURANCE II, INC.**

**ARTICLES II - PRINCIPAL OFFICE**

*The principal place of business and mailing of this corporation shall be:*

**15876 SW 137 AVE  
MIAMI, FL 33177**

**ARTICLE III - SHARES**

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

**100 Shares**

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

*The name and address of the initial registered agent is:*

**AILEEN CRESPO  
13364 SW 128 ST  
MIAMI, FL 33186**

**ARTICLE V - INCORPORATOR**

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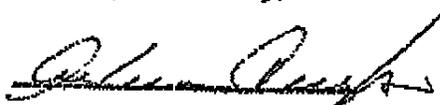
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**The name and street address of the incorporator to these Articles of Incorporation is:**

**AILEEN CRESPO  
15876 SW 137 AVE  
MIAMI, FL 33177**

**The undersigned incorporator has executed these Article of Incorporation this 9 day of January, 2001.**

  
Signature

**ARTICLE VI-DIRECTOR(S)**

**The name(s) and street address(es) of the director(s) to these Article of Incorporation is (are):**

**AILEEN CRESPO  
13364 SW 128 ST (PRESIDENT)  
MIAMI, FL 33186**

**ROLANDO GARCIA  
13364 SW 128 ST (V-P, S, T)  
MIAMI, FL 33186**

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

**Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 provision of all status related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent**

  
Registered Agent Signature

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