**Charter Number Only** Address 0 N L Y City State Phone \*\*\*\*\*78.75 CORPORATION(S) NAME PP Toll Free: 1-800-432-3028 Profit ) NonProfit ( ) Amendment ( ) Merger ) Foreign ) Dissolution ( ) Mark ) Limited Partnership ) Annual Report ) Other ) Reinstatement ) Reservation ) Change of Registered Agent Certified Copy ( ) Photo Copies ( ) Certificate Under Seal Call When Ready ( ) Call If Problem ( ) After 4:30 Walk In ) Will Wait ( ) Mail Out Name Availability Document Examina Updater Verifier W.P. Verifier



January 18, 2001

**EMPIRE** 

MIAMI, FL

SUBJECT: MUTUAL INSURANCE GROUP, INC.

Ref. Number: W01000001377

We have received your document for MUTUAL INSURANCE GROUP, INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

# Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 801A00002892

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DUPARIMENT OF STATE
DIVISION OF CORPORATION

## ARTICLES OF INCORPORATION

OF

<u> </u>	
Mutual General Insurance	
group, Inc.	
The undersigned incorporator(s), for the pupose of forming a Profit Corporation under Chapter 607 of the Florida Statues, hereby adopt(s) the following Articles of Incorporation.	
The name of this corporation shall be:	

## Mutual General Insurance Group, Inc.

#### Article II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

#### <u>Article III</u>

The principal place of business of this corporation is:

3399 NW 72 Que. Suite 208 Miami, FL 33122

### Article IV

The general nature of business of this corporation is to transact any and all lawful business.

#### <u>Article V</u>

The aggregate number of shares which this corporation shall have authority to issue are \_\_\_\_\_\_ shares having an individual par value of \$\_\_\_\_\_\_ to o

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### Article VI

The name and street address of the initial Registered Agent of this corporation shall be:

Regina P. Sanchez 15607 SW 103 Terr. Miami, FL 33196

#### Article VII

The the name and address of the initial board of director(s) shall be:

REGINA P. SANCHEZ (PRESIDENT) 15607 SW 103 TERR MIN Fl 33196
RICARDO A. SANCHEZ (TREASURE)

CEGIN M LARRENDOUETTE (SECRETARY) 821 NE 207 LANE MIN Fl 33179

#### Article VIII

The name and address of the incorporator executing these Articles of Incorporation is:

KICARDO A SANCHEZ 3399 NW 71 AVE SUZTZ#108 MIA Fl 33111

The undersigned has executed these Articles of Incorporation this 17 day of JAN , 2001.

Indorporator

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

INSURANCE GROUP, INC

(Name of Corporation)

Having been named as Registered Agent and to accept service of process for the above stated corporation at the place designated in the Articles of Incorporation, 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.

Registered Agent

.

