

CT CORPORATION SYSTEM

CORPORATION(S) NAME

**P01000012315**

All Insurance of Florida, Inc.

01 JAN 30 AM 9:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILE**

**900003602009--8**

-01/30/01-01071--015

\*\*\*\*\*78.75 \*\*\*\*\*78.75

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Profit - <i>Info</i> | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit                       |   |   |
| <input type="checkbox"/> Foreign                         | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
|  | <input type="checkbox"/> Reinstatement          |   |
| <input type="checkbox"/> Limited Partnership             | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> LLC                             | <input type="checkbox"/> Name Registration      | <input type="checkbox"/> Change of RA       |
|  | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                |
| <input checked="" type="checkbox"/> Certified Copy       | <input type="checkbox"/> Photocopies            | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Call When Ready                 | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In              | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out                        |   |   |

RECEIVED  
01 JAN 30 PM 12:11  
CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

1/30/01

Order#: 353204

Ref#: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

**T. SMITH FEB 01 2001**

*W1-222-15*



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

January 30, 2001

CT CORPORATION SYSTEM

SUBJECT: ALL INSURANCE OF FLORIDA, INC.  
Ref. Number: W01000002268

We have received your document for ALL INSURANCE OF FLORIDA, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 487-6927.

Tracy Smith  
Document Specialist

Letter Number: 501A00005610

*Please back-date*

*Thls*  
*[Signature]*

**ARTICLES OF INCORPORATION**

**OF**

**LINEAR INSURANCE, INC.**

**FILED**  
**01 JAN 30 AM 9:28**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**

**ARTICLE I. NAME**

The name of this corporation shall be **LINEAR INSURANCE, INC.**

**ARTICLE II. COMMENCEMENT & DURATION**

The commencement of this corporation's existence shall be at the time of the filing of these Articles Of Incorporation by the Florida Department of State. This corporation's duration shall be perpetual.

**ARTICLE III. PURPOSE**

This corporation is being organized for the purpose of engaging in the transaction of any and all business activities permitted under the laws of Florida and the United States of America.

**ARTICLE IV. CAPITAL STOCK**

This corporation shall have the authority to issue 1,500 \$5.00 par value shares of common capital stock.

**ARTICLE V. PREEMPTIVE RIGHTS**

Every shareholder, upon the sale for cash by this corporation of any shares of new capital stock of the same kind, class, or series, as that which the shareholder already holds, shall have the preemptive right to purchase a pro rata share thereof (as nearly as may be done without the issuance of fractional shares) at the price at which such shares are offered to others.

## **ARTICLE VI. TRANSFER RESTRICTIONS**

No shareholder shall have the right to sell, assign, pledge, encumber, transfer, or otherwise dispose of any shares of the capital stock of this corporation, without first offering such shares for sale to this corporation at the net asset value thereof. Such offer shall be in writing, signed by the shareholder, sent by registered or certified mail to this corporation at its registered office address, and open for acceptance by this corporation for a period of fifteen days from the date of mailing. If this corporation fails or refuses, within such period, to make satisfactory arrangements for the purchase of such shares, the shareholder shall have the right to dispose of such shares without any further restrictions.

On the death of any shareholder, this corporation shall have the right to purchase any shares of the capital stock of this corporation owned by the shareholder immediately prior to the shareholder's death, on the terms set forth above, and this provision shall be binding upon the personal representative of the shareholder.

Each stock certificate issued by this corporation shall carry the following legend:

"These Shares Are Held Subject To Certain Transfer Restrictions  
Imposed By This Corporation's Articles Of Incorporation, A Copy  
Of Which Is On File At This Corporation's Principal Office."

## **ARTICLE VII. INITIAL BOARD OF DIRECTORS**

The number of directors on this corporation's Initial Board Of Directors shall be three. The number of directors may be increased or decreased from time to time, as provided in this corporation's bylaws, but shall never be less than one.

The name and address of each individual who shall serve as a member of the Initial Board Of Directors are:

1. Denise Jarrin Roberts  
1906 South Florida Avenue  
Lakeland, Florida 33803
2. \_\_\_\_\_  
\_\_\_\_\_ N/A \_\_\_\_\_  
\_\_\_\_\_

3.

N/A

#### **ARTICLE VIII. INDEMNIFICATION**

This corporation shall indemnify any officer, director, employee, or agent, and any former officer, director, employee, or agent, to the full extent permitted by law.

#### **ARTICLE IX. PRINCIPAL OFFICE & INITIAL REGISTERED OFFICE & AGENT**

The address of this corporation's principal office and the address of this corporation's initial registered office shall be:

1906 South Florida Avenue  
Lakeland, Florida 33803

The name of the individual who shall serve as this corporation's initial registered agent at that address is:

Denise Jarrin Roberts

#### **ARTICLE X. INCORPORATOR**

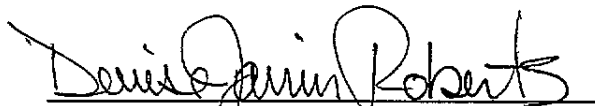
The name and address of the individual who shall serve as this corporation's incorporator are:

Denise Jarrin Roberts  
1906 South Florida Avenue  
Lakeland, Florida 33803


#### **ARTICLE XI. AMENDMENT**

This corporation reserves the right to amend or repeal any provisions in these Articles Of

Incorporation, or any amendments hereto. Any rights conferred upon the shareholders shall be subject to this reservation.


  
Denise Jarrin Roberts - Incorporator

I hereby accept my designation as resident agent and agree to serve as the resident agent of LINEAR INSURANCE, INC. I hereby state that I am familiar with and accept the duties and responsibilities as registered agent for LINEAR INSURANCE, INC.

  
Denise Jarrin Roberts - Registered Agent

State Of Florida  
County Of Polk

On January 29, 2001, Denise Jarrin Roberts, designated above as the individual who shall serve as the corporation's initial registered agent and incorporator, who is personally known to me, or produced a Florida driver's license as identification, personally appeared before me at the time of notarization, and, after being given the oath, acknowledged signing these Articles Of Incorporation Of LINEAR INSURANCE, INC.

  
Notary Public



Joanne Dyer  
MY COMMISSION # CC950090 EXPIRES  
June 28, 2004  
BONDED THRU TROY FAIN INSURANCE, INC.

(Printed Or Typed Name)  
Commission Expiration Date:  
Commission Number:

C:\WP\CLIENTS-Misc\Jarrin-Roberts\ARTICLES

01 JAN 30 AM 9:28  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA