TRANSMITTAL LETTER

P01000013268

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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-02/05/01--01142--002
*****87.50 *****87.50

SUBJECT: IDeal INSURANCE AGency, INC.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ $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 COPY REQUIRED

FROM: Guilfort Jieuvil
Name (Printed or typed)

1425 NW 192 terrace
Address

Miami, FL 33169
City, State & Zip

(305) 754 8886 or 336-3086
Daytime Telephone number

FILED
01 FEB -5 AM 8:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

Guilfort
AUTHORIZATION BY PHONE TO
CORRECT Incorp.
DATE 2-5-01
DOC. EXAM TC

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

IDEAL INSURANCE Agency, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

BUS: 389 NE 69 St.
Miami, FL 33138

MAILING: 1425 NW 192 terr
Miami, FL 33169

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Sell INSURANCE Policy.

ARTICLE IV SHARES

The number of shares of stock is:

This Corporation is Authorized to issue 3000 shares of commons stocks each individual shares having an initial per value of one dollar and all such share shall be designated commons shares.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

GuilFort Dieuvil
1425 NW 192 terr
Miami, FL 33169

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the registered agent is:

GuilFort Dieuvil
1425 NW 192 terr
Miami, FL 33169

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

GuilFort Dieuvil
1425 NW 192 terr.
Miami, FL 33169

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent — Date: 02/02/01

Signature/Incorporator — Date: 02/02/01