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# Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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# FLORIDA PROFIT CORPORATION OR P.A.

AUTO INSURANCE SHOPPER, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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FAX NO. 3024725233

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## ARTICLES OF INCORPORATION

04,05-01

#### Article I. Name

The name of this Florida Corporation is: Auto Insurance Shopper, Inc.

#### Article II. Address

The Corporation's mailing address is: 1540 South 15-A Deland, FL 32720

#### Article III. Registered Agent

The name and address of the Corporation's registered agent is: Maria S. Mans 1540 South 15-A Deland, FL 32720

#### Article IV. Board of Directors

The name of each member of the Corporation's Board of Directors is:

Maria S. Mans

The affairs of the Corporation shall be managed by a Board of Directors of nsisting of no less than one director. The number of directors may be increased or decreased from time to time in accordance with the Bylaws. The directors shall be protected from personal liability to the fullest extent permitted by applicable law.

Registered Agents Ltd. 1220 North Market Street Wilmington, DE 19801 800-441-5940 SECRETARY OF STATE OF STATE OF CORPORATIONS

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# Article V. Capital Stock

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The Corporation shall have the authority to issue 1,500 shares of common sto-k, par value zero per share.

#### Article VI. Incorporator

The name and address of the incorporator is: Jeff Tindall 1220 Market Street Suite 606 Wilmington, DE 19801

### Article VII. Corporate Existence

These Articles of Incorporation shall become effective and the corporate existence will begin on April 5, 2001.

The undersigned incorporator executor executed these Articles of Incorporation on April 5, 2001.

Jeff Tindall Incorporator

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# CERTIFICATE OF DESIGNATION REGISTERED AGENT/OFFICE

CORPORATION:
Auto Insurance Shopper, Inc.

REGISTERED AGENT/OFFICE Maria S. Mans 1540 South 15-A Deland, FL 32720

I agree to act as registered agent to accept service of process for the comporation named above at the place designated in this Certificate. I agree to comply with the provisions for all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.

maria 5. mani

Maria S. Mans Date: April 5, 2001

Registered Agents Ltd. 1220 North Market Street, Suits 606 Wilmington, DE 19801 800-441-5940 DIVISION OF CORPORATIONS

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