TRANSMITTAL LETTER

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

SUBJECT: DUNSFORD INSURANCE SERVICES INC.

(Proposed corporate name-must include suffix)

900004008339 -04/13/01--01068--004 ****122.50 *****78.75

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

[]\$70.00

[]\$78.75

[x] \$122.50

[]\$131.25

From: GREGORY J.

Name (printed or typed)

10712 NW

Address

PEMBROKE PINES

City, state & zip code

954-243-5859 Daytime telephone number

ARTICLES OF INCORPORATION FOR DUNSFORD INSURANCE SERVICES, INC.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation:

ARTICLE I: NAME

The name of the corporation shall be: Dunsford Insurance Services, Inc.

ARTICLE II: PRINCIPLE OFFICE

The principle place of business and mailing address of this corporation shall be:

10712 N.W. 11th Street Pembroke Pines, FL 33026

ARTICLE III: SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares.

ARTICLE IV: REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Gregory J. Dunsford 10712 N.W. 11th Street Pembroke Pines, FL 33026

ARTICLE V: PURPOSE

The corporation may engage in or transact any or all lawful activities or business permitted under the laws of the State of Florida.

ARTICLE VI: INCORPORATOR

Gregory J. Dunsford 10712 N.W. 11th Street Pembroke Pines, FL 33026

The undersigned incorporator has executed these Articles of Incorporation this 22 day of January, 2001.

Gregory J. Dunsford

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 and 607.0505, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office in the State of Florida.

- 1. The name of the corporation shall be: DUNSFORT INSURANCE SERVICES, INC.
- 2. The name and address of the initial registered agent is:

Gregory J. Dunsford 10712 N.W. 11th Street Pembroke Pines, FL 33026

Having been named registered agent and to accept service of process for the above stated corporation at the 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 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.

Gregory J. Dunsford

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SECRETARY OF STATE