PO/OODDHIJ 9/

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

SUBJECT:	Old Flo	rida Insurance	e, Inc. te name - must include suff	·		<u>.</u> #
		(Proposed corpora	te name - must include suff	īx)		
Enclosed is an	original and one	(1) copy of the articles	of incorporation and a c	-04/23/ ****)43470 — 010106401 70.00 *****70	
\$70 Filing I	.00	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	Signature \$131. Filing For Certified & Certified	ee, I Copy	
			ADDITIONAL CO	PY REQUI	RED	
FROM	BAKRY	BANDLER, E.I.	A., P.A. or typed)			
	32751	J. Hillsboro B. Addres	Ivd., Svite 207	-	7 <u>4</u> 2	
	<u>Deerfiel</u>	d Beach, FL 3 City, State	3442-9476 & Zip	·	APR 23 CRETARY LAHASSE	
	954	- 3 54 - 278 Daytime Telepho			PHIZ: 15 OF STATE E FLORIDA	

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

D. WHITE APR 2 4 2001

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Old Florida Insurance, Inc

01 APR 23 PH 12: 15
SECRETARY OF STATE
TALLAHASSEE FLORID

ARTICLE II PRINCIPAL OFFICE

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

3820 N.W. 78 Lane Coral Springs, FL 33065

ARTICLE III SHARES

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

1000 shares At \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jimmy Neuman 3820 N.W. 78 Lane Coral Springs FL 33065

ARTICLE V

Limitation of corporate powers

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, unless limited are as follows:

ARTICLE VI

Initial registered agent and street address

The name and the street address of the initial registered agent is:

Jimmy Newman 3820 N.H. 78 Lane Coral Springs, FL 33065

ARTICLE VII

Incorporators

The name(s) and the street address(es) of the incorporator(s) for these articles of incorporation is(are):

Thinky Neuman, - Pres. V.P., Sec., Treas.

3820 N.W.78 Lane

(oral Springs, FL 33065

The undersigned incorpora	ator has executed these Articles of	of Incorporation this _	day of	_
April	, 19-<u>7001</u>) .			

Signature of Incorporator:

Jimmy Newman
Typed name of incorporator signing

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

	SECRE)1 APR	
	RETARY OF AHASSEE F	23	
1. The name of the corporation is:	OF S	뫈	П
Old Florida Ensurance, Inc.	STATE ORIDA	12: 15	
(must include suffix)			

2. The name and address of the registered agent and office is:

 Jimmy Newman (NAME)
\ (NAME)
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)
 Coral Spring, FL 33065 (CITY/STATE/ZIP)
(CITY/STATE/ZIP)

Having been named as 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.

fring of Manager 4/19/01 (SIGNATURE) (DATE)