

FROM: (PLEASE PRINT) PHONE (

CR2E031(7/97)

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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OTHER FILINGS			
Annual Report Fictitious Name		REGISTRATION/QUALIFICATION OF THE CONTROL OF THE CO	

Examiner's Initials

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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:

Source One Insurance Agency, Inc.

ARTICLE II: PRINCIPAL OFFICE

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

7216 SW 8th Street, Suite # 5 Miami, Fl. 33144

ARTICLE III: SHARES

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

One Hundred (100)

ARTICLE IV: INITIAL REGISTER AGENT AND ADDRESS

The name and address of the initial registered agent is:

Carlos F. Gomez 7216 SW 8th Street, Suite # 5 Miami, Fl. 33144

ARTICLE V: INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

- 1- Carlos F. Gomez. President and Secretary. 7216 SW 8th Street, Suite # 5. Miami, Fl. 33144.
- 2- Carlos E. Cardenas. Vice-President and Treasurer. 7216 SW 8th Street, Suite # 5. Miami, Fl. 33144.

ARTICLE VI: DIRECTORS

The name(s) and street address(es) of the Director(s) to these Articles of Incorporation is (are):

- 1- Carlos F. Gomez. President and Secretary. 7216 SW 8th Street, Suite # 5. Miami, Fl. 33144.
- 2- Carlos E. Cardenas. Vice-President and Treasurer. 7216 SW 8th Street, Suite # 5. Miami, Fl. 33144.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 20^{th} day of May, 2001.

Mr. Carlos F. Romez

President-Secretary

Carlos E. Cardenas

Vice-Pres. And Treasurer

<u>CERTIFICATE OF DESIGNATION</u> REGISTERED AGENT / REGISTERED OFFICE

- . Pursuant to the provisions of sections 607.0501 or 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.
 - 1-The name of the corporation is:

 Source One Insurance Agency, Inc.
 - The name and address of the registered agent and office is:
 Mr. Carlos F. Gomez
 7216 SW 8th Street, Suite #5
 Miami, Fl. 33144

HAVING BEEN NAMED AS A 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 OBLIGATION OF MY POSITION OF REGISTERED AGENT.

SIGNATURE

REGISTERED AGENT FILING FEE: \$35.00