

PO 1000059094

TRANSMITTAL LETTER

FILED

01 JUN 11 PM 5:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

200004398092--7  
-06/12/01--01014--014  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT : T J G INSURANCE, INC.

Enclosed is an original and one ( 1 ) copy of the articles of  
incorporation and our check for \$ 78.75

FROM:

JEROME LEVICK  
1927 N.W. 9TH AVENUE  
FORT LAUDERDALE, FLORIDA 33311

( 954 ) 462-2539

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

D. BROWN JUN 13 2001 ✓

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01 JUN 11 PM 5:00

ARTICLES OF INCORPORATION

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OF

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T J G INSURANCE, INC.

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 :

T J G INSURANCE, INC.

ARTICLE II PRINCIPAL OFFICE

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

1927 N.W. 9TH AVENUE  
FORT LAUDERDALE, FLORIDA 33311

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 500 shares.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JEROME LEVICK  
1927 N.W. 9TH AVENUE  
FORT LAUDERDALE, FLORIDA 33311

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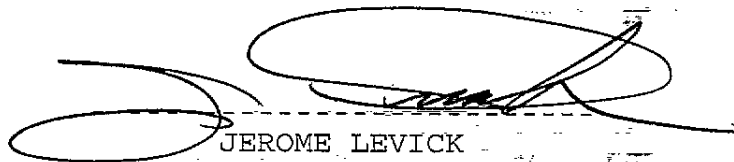
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

1> JEROME LEVICK  
1927 N.W. 9TH AVENUE  
FORT LAUDERDALE, FLORIDA 33311

2>

3>

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 7TH day of JUNE, 2001.

  
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JEROME LEVICK  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 of 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 :

T J G INSURANCE, INC.

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

JEROME LEVICK  
1927 N.W. 9TH AVENUE  
FORT LAUDERDALE, FLORIDA 33311

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.



JEROME LEVICK

JUNE 7, 2001