

OFFICE USE ONLY

ORPORATION NAME(S) &	DOCUMENT NUMBER(S) (if known):
Independent	Life and Health Insurance Inc.
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
Walk in Pick up time	(Document #) Certified Copy Certified Copy
Mail out Will wait	Photocopy Certificate of Status
	AMENDMENTS 25
NEW FILINGS	AMENDMENTS 5 C7
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Mergev
OTHER FILNGS	REGISTRATION
Annual Report	SUPPLICIENCY OF FILING NOTATION
Fictitious Name	TO ACKNOWLEDGE TO ACKNOWLEDGE AND INTERPOSED
Name Reservation	Limited Partnership LZ :ZI Wd 1 Z NAC 1002 .
	Reinstatement
	DIAISIOK OF CORPORATIONS DEPARTMENT OF STATE DIVISION OF CORPORATIONS
	Other Taxing to Initials
E031(9/92)	Examiner's Initials

ARTICLES OF INCORPORATION FOR INDEPENDENT LIFE AND HEALTH INSURANCE INC.

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

ARTICLE I NAME

The name of the corporation shall be:

INDEPENDENT LIFE AND HEALTH INSURANCE IN

ARTICLE II PRINCIPAL OFFICE

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

1000 PONCE DE LEON BLVD. #123 CORAL GABLES, FL 33134

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have shall be:

SHARES: 100 @ \$1.00

ARTICLE IV REGISTERED AGENT

The name and Florida street address of the initial registered agent shall be:

CLARA E. SUAREZ 1000 PONCE DE LEON BLVD. #123 CORAL GABLES, FL 33134

ARTICLE V INCORPORATOR

The name and address of the incorporator(s) to these Articles of Incorporation shall be:

CLARA E. SUAREZ 1000 PONCE DE LEON BLVD. #123 CORAL GABLES, FL 33134

Signature of Incorporator

Date

ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the Director(s)/Officer(s) shall be:

CLARA E. SUAREZ (P) 1000 PONCE DE LEON BLVD. #123 CORAL GABLES, FL 33134

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the articles, 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 completed performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature

Date