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

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SUBJECT:	FLOKIDA	Omm ERCIAL (Proposed corporate name	ChalDERWA	FEDS	71/0
		(Proposed corporate name	- must include a ST	MERS,	<u> 14/4</u>
		The state indition	- mast metade sainx)	/	
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Enclosed is an origin	nal and one(1) copy of the article	s of incorporation and a ch	eck for	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of	
		ADDITIONAL COPY	Status Y REQUIRED	
FROM:	GWEN Name (Pri	0AVES inted or typed)		
	1233 45	th ST.	OT JUL 18 SECRETAS ALLAHASS	
,	WEST City, Si	PALM BEACK,	हित करी	
-	56/- 84 Daytime Tele	18-7110 ephone number	A	

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

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ARTICLES OF INCORPORATION

NAME

ARTICLE I

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

The name of the corporation shall be: FLORIDA COMMERCIAL UNDERWRIFERS, INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 1233 45457 WEST PALM BEACH, FL.33407 ARTICLE III SHARES
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any che time is:
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: GWEN MAYES TRUST PHTED 7/03/01 1233 45457 WEST PALM BFACA, PL 33407
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: GWEN MAYES 12-33 45 # 55. WEST PALM BEACH, Fl. 33407
M. M. M. M. Signature/Incorporator 4/12/0/ Date

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent