

Florida Department of State

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Division of Corporations

Fax Number

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From:

Account Name : CAPITAL CONNECTION, INC.

Account Number : I20000000257

Fax Number

: (850)224-8870 : (850)222-1222

FLORIDA PROFIT CORPORATION OR P.A.

ALLWAY INSURANCE SERVICES, INC.

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ARTICLES OF INCORPORATION

OF

ALLWAY INSURANCE SERVICES, 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 is ALLWAY INSURANCE SERVICES, INC.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 22470 Southshore Drive, Land O'Lakes, FL. 34639.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one-hundred (100) shares having a par value of one-dollar (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Anthony C. Ekonomides, The Ekonomides Law Firm, P.A., AmSouth Bank Building, Suite 201, 7800 113th Street N., Seminole, FL. 33772.

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ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL OFFICERS

The name and address of the initial Officer of the corporation is, President/Secretary: Ivette A. Rodriguez, 22420 Southshore Drive, Land O'Lakes, FL. 34639.

ARTICLE VII: SPECIAL PROVISIONS

It is the intent of the incorporator and directors that the corporation qualify under Section 1244 of the Internal Revenue Code and that the corporation file as a Sub S Corporation. Such actions as are necessary will be taken by the appropriate officers to accomplish this compliance.

The undersigned has executed these Articles of Incorporation this 26th day of October 2001.

"Capital Connection, Inc. by Weimar Lopez, Client Representative"

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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:	FLLWAY INSUPANCE :
SERVICES, INC.	
2. The name and street address of t	he registered agent and office
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AMSOUTH BANK BUILDING - SUITE 20 SEMINOLE FL. 33770	1 TOW TIME TO THE TIME TO THE TOWN

HAVE 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 FURTUEE 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 RECISTERED AGENT.

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