TRANSMITTAL LETTER

D01000118911

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



000004726600---2 -12/14/01--01044--019 *****87.50 *****87.50

SUBJECT: R.J. INSURANCE & SERVICES INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 □ \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate o Status ADDITIONAL COPY REQUIRED
FROM:	RENE JOSEPH Name (Printed or typed)	
	2315 NE 174th Terrace	Address
	NORTH MIAMI BEACH City,	FLORIDA 33160 State & Zip
	(305) 978-3240	elephone number

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I The name of the corporation shall be: R.J. INSURANCE & SERVICES INC. PRINCIPAL OFFICE ARTICLE II The principal place of business/mailing address is: 2315 NE 174th Terrace, North Miami Beach, Florida 33160 **PURPOSE** ARTICLE III The purpose for which the corporation is organized is: To provide quality Insurance Service to the public. ARTICLE IV SHARES The number of shares of stock is: INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): PRESIDENT/OWNER RENE JOSEPH Beach, Florida 33160 2315 NE 174th Terrace, North Miami REGISTERED AGENT ARTICLE VI The name and Florida street address of the registered agent is: RENE JOSEPH 2315 NE 174th Terrace, North Miami Beach, Florida 23160 ARTICLE VII *INCORPORATOR* The name and address of the Incorporator is: RENE JOSEPH 2315 NE 174th Terrace, North Miami Beach, Florida 33160 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent