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To:
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Fax Number : (850)205-0381

From:
Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850)224-8870
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RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL FILE DATE

FLORIDA PROFIT CORPORATION OR P.A.

FLORIDA WINDSTORM INSURANCE DISCOUNT INSPECTIONS, IN

28th

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	$78.75

Capital Connection, Inc.

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 1, 2002

YOUR CAPITAL CONNECTION

SUBJECT: FLORIDA WINDSTORM INSURANCE DISCOUNT INSPECTIONS, INC.
REF: W02000005905

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.)

If you have any further questions concerning your document, please call (850) 245-6931.

Becky McKnight
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RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

FLORIDA WINDSTORM INSURANCE
DISCOUNT INSPECTIONS, L.C.

Feb 22, 2002

Department of State

I have no intention of reinstating the name Florida Windstorm Insurance Discount Inspections, L.C. It may be released for use.

Sincerely,
Brantley J Bellah
Managing Member

1602 Alton Rd., #124 Miami Beach, FL 33139 305.525.3264 CBC # 060255
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ARTICLES OF INCORPORATION

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:

FLORIDA WINDSTORM INSURANCE DISCOUNT INSPECTIONS, INC.,

ARTICLE II - PRINCIPAL OFFICE

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

1602 ALTON RD., #124
MIAMI BEACH, FL., 33139

ARTICLE III - PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE WINDSTORM INSURANCE INSPECTIONS

ARTICLE IV - SHARES

The number of shares of stock is:

5000 SHARES - NO PAR COMMON VALUE

ARTICLE V - INITIAL OFFICERS/DIRECTORS

The names(s) & address(es) are:

BLANTON T. BELCHER
1602 ALTON RD., #124
MIAMI BEACH, FL., 33139

ARTICLE VI - REGISTERED AGENT

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

BLANTON T. BELCHER
1602 ALTON RD., #124
MIAMI BEACH, FL., 33139

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ARTICLE VII - INCORPORATORS

The name and address of the incorporator is:

BLANTON T. BELCHER
1602 ALTON RD., #124
MIAMI BEACH, FL., 33139

I hereby am familiar with and accept the duties and responsibilities as Registered Agent.

Signature (Registered Agent) — Date: Feb 22, 02

Signature (Incorporator) — Date: Feb 22, 02

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