Re: American Risk Management, Inc.

Dear Sir or Madam:

Enclosed please find the following:

- 1. Original Articles of Incorporation of American Risk Management, Inc.
- 2. Original of Certificate of Designation
- 3. Check for \$78.50 for filing fees.

We are requesting a copy of the Articles.

Your kind attention to this matter is appreciated.

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Yours truly,

Pearl Crosby Smith

PCS/jr

Enclosure(s)

Town Aug.



# FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

August 6, 2002

PEARL CROSBY SMITH 550 S COCOA BLVD STE A COCOA, FL 32922

SUBJECT: AMERICAN RISK MANAGEMENT, INC.

Ref. Number: W02000022666

We have received your document for AMERICAN RISK MANAGEMENT, INC. and your check(s) totaling \$78.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith
Document Specialist
New Filing Section

Letter Number: 102A00046941

### ARTICLES OF INCORPORATION of

#### ALLIED RISK MANAGEMENT, INC.

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 ALLIED RISK MANAGEMENT, INC.

#### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be 550 So. Cocoa Blvd., Cocoa, Fl 32922.

#### **ARTICLE III - SHARES**

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares of common stock, each having no par value.

#### ARTICLE IV - TERM OF EXISTENCE

This corporation shall have perpetual existence.

#### ARTICLE V - DIRECTORS

The corporation shall have two directors initially. The number of directors may be increased or diminished from time to time by the by-laws, but shall never be less than one. The name and address of the first Directors who shall hold office are:

Pearl Crosby Smith 550 So. Cocoa Blvd. Cocoa, Fl 32922

and

Nancy Gee 433 Long Leaf Drive Melbourne, Fl 32940 OLVISION OF CORFORATIONS

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#### ARTICLE VI PURPOSE

The purpose is to carry on any business that is lawful under the laws and constitutions of the State of the State of Florida and the United States. Notwithstanding anything to the contrary, this corporation shall comply with all the provisions under the Internal Revenue Code to qualify for Sub Chapter S status.

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this \( \sum\_{\text{day}} \) of \( \sum\_{\text{day}} \) \( \sum\_{\

Signature

Signature

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607-0501,(617.0501 FOR NON PROFIT) FLORIDA STATUTES, THE UNDERSIGNED 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: ALLIED RISK MANAGEMENT, INC.
- The name and address of the registered agent and office is: Pearl Crosby Smith 550 So. Cocoa blvd. Cocoa, Fl 32922

I, Pearl Crosby Smith, having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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.

Dated this \_\_\_\_ day of August, 2002.

PEARL CROSBY SMITH

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

12:30