FILED 02 OCT -9 AH 10: 41 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

| SUBJECT: AL | L COUNTY In | | う。 か。 ************************************ | |
|---|-----------------------------------|-----------------------------|---|--|
| ······ | (PROPOSED CORPORA | TE NAME – <u>MUSŤ INCLU</u> | JDE SUFFIX) | |
| | | | | |
| | | | | |
| Enclosed are an orig | rinal and one (1) copy of the art | icles of incorporation and | a check for: | |
| | M | | | |
| \$70.00 | \$78.75 | \$78.75 | 2 \$87.50 | |
| Filing Fee | Filing Fee | Filing Fee | Filing Fee, | |
| | & Certificate of Status | & Certified Copy | Certified Copy | |
| | | | & Certificate of | |
| | | A DEPARTMENT AND | Status | |
| | | ADDITIONAL CO | PY KEQUIKED | |
| £ | ~ · · · · · · · | > | | |
| FROM: Andrew M. Beverly Name (Printed or typed) | | | | |
| rame (Finited of typed) | | | | |
| 2000 Florida Dd Callo 202 | | | | |
| 3802 Ehrlich Rd. Suite 303 | | | | |
| Address | | | | |
| | - | 224 6 | *** | |
| Tampa 4L 33624 | | | | |
| | City | State & Zip | | |
| | | | | |
| 613-962-4297 | | | | |
| Daytime Telephone number | | | | |

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

JB 10/10

| ARTICLES OF INCORPORATION | Eu . |
|---|---|
| In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) | PILED |
| 4 TOTAL TO T | 02 OCT -9 AM 10: 41 |
| ARTICLE I NAME The name of the corporation shall be: | SECRETAGE |
| ALL County Insurance, Inc | TALLAHASSEE STATE |
| ALL COUNTY Insurance, Inc | SECRETARY OF STATE TALLAHASSEE, FLORIDA |
| | · |
| ARTICLE II PRINCIPAL OFFICE | |
| The principal place of business/mailing address is: | |
| 3802 Ehrlich Rd., Suite 303 | - |
| Tampa Florida 33624 | |
| ARTICLE III PURPOSE | |
| The purpose for which the corporation is organized is: | |
| Insurance Sales | |
| | |
| ARTICLE IV SHARES | |
| The number of shares of stock is: | |
| 500 Shares | |
| | |
| ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) | |
| The name(s), address(es) and title(s): | |
| | |
| | |
| | |
| | |
| ARTICLE VI REGISTERED AGENT | , <u>-</u> |
| The name and Florida street address of the registered agent is: | |
| Robert A. Beverly 3802 Ehrlich Rd, Suite 303 Tampa, Florida 33624 | |
| 3802 Ehrlich Kd, 'Swite 303 | |
| lampa, Horida 33624 | |
| ARTICLE VII INCORPORATOR | |
| The name and address of the Incorporator is: | |
| Andrew M. Beverly | |
| 3802 Ehrlich Rd, Suite 303 | |
| Tampa, Florida 33624 | |
| *************************************** | ******** |
| Having been named as registered agent to accept service of process for the above stated corp | oration 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 |
| Placed N. R. Mac | Oct 1, 2002 |
| Signature/Registered Agent | Date |
| pignature regioniest trigoth | |
| A A A A A A A A A A | Oct 1 2002 |
| Signature/Incorporator | Date |
| orginature/incorporator / | Daw |