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TRANSMITTAL LETTER

PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

Enclosed is an original and one(1) copy of the article	es of incorporation and a	check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: RAU/ PERCY % INT FINANCIAL CORP Name (Printed or typed)		
6708-B Stinling Ted		
Hollywood		24
954-893 Daytime Te	-5580	

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

ARTICLES OF INCORPORATION

of

J & R Insurance Of Miami, Inc.

02 KOV 27 PH 12: II
SECRETARY OF SIA

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida, In compliance with Chapter 607 and/or Chapter 621.F.S. (Profit)

Article I - Name

The name of the corporation shall be: J & R Insurance Of Miami, Inc.

Article II - Principal Office

The principal place of business/mailing address is:

4718 E 8th Court Hialeah, FL 33013

Article III - Purpose

The Corporation is organized for the purpose of engaging in any activity of business permitted under the laws of the United States and the State of Florida.

Article IV - Capital Stock

The Corporation is authorized to issue <u>One Thousand</u> shares (1000) of <u>One</u> Dollar(s) (\$1.00) per value Common Stock, which shall be designated "Common Shares."

Article V - Initial Board of Directors

Director 1

Director 2

Director 3

Barbara C. Almeida 4718 E 8th Court Hialeah, FL 33013

Article VI - Registered Agent

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

Barbara C. Almeida 4718 E 8th Court Hialeah, FL 33013

<u>Article VII - Incoporators</u>

The names and addresses of the incoporators signing these Articles of Incorporation are as follows:

> Barbara C. Almeida 1. 4718 E 8th Court Hialeah, FL 33013

	ndersigned subscriber(s) have executed these Articles of his <u>34</u> th day of <u>NOVEMBER</u> , 2002.
	* famille C. Affects (Seal)
	(Seal)
STATE OF FLORIDA COUNTY OFBROWARD	
before me, a Notary Public authorized above, personally appeared: BARB	to take acknowledgments in the State and County set forth
* Barbaro Oghand	F1 DR License
Signatures	Form of identification
Signatures	Form of Identification
Signatures	Form of Identification
	executed the foregoing Articles of Incorporation, who acknowledge before me ation that I relied upon the form_of identification of the above named an oath (was)(was not) taken.
Notary Seal	
Raul D. Perez Commission # DD 055901 Expires Oct. 16, 2005 Bonded Thru Atlantic Bonding Co., Inc.	Witness my hand and official scalin the County and State last foresaid this

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENTS

Certificate Of Registered Agent Of

J & R Insurance Of Miami, Inc.

Persuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at:	4718 E 8th Court		
	Hialeah, FL 33013		
has named	Barbara C. Almeida		
located at the aforesaid address, as its Registered Agent to accept service of process within this state.			

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in the capacity, and agree to comply with the provisions of Flarida Law in keeping open said office.

(registered agent)

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