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#### TRANSMITTAL LETTER

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

SUBJECT:	Blen Stries In	surance Underw	riters, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :			
□ \$70.00	□ \$78.75	<b>X</b> \$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
J	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of Status
		ADDITIONAL CO	1
		7,000,1710,1710,000	Tregeness
FROM: Anderson Law Offices			
Name (Printed or typed)			
1031 Ives Dainy Road, Ste. 228			
Address			
Month Minis D. J. El 33,179			
North Miani Beach, FL 33179 City, State & Zip			
(305) 914-5693			
Daytime Telephone number			

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



## FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

November 21, 2002

GAILA ANDERSON ANDERSON LAW OFFICES 1031 IVES DAIRY RD STE 228 NORTH MIAMI BCH, FL 33179

SUBJECT: BLEU SKIES INSURANCE UNDERWRITERS, INC.

Ref. Number: W02000033145

We have received your document for BLEU SKIES INSURANCE UNDERWRITERS, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

UNABLE TO REACH YOU BY TELEPHONE. REGISTERED AGENT SIGNATURE MUST BE IDENTICAL WITH THE DESIGNATED NAMED.

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) 245-6933.

Dale White Document Specialist New Filings Section

Letter Number: 302A00062933

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### ARTICLES OF INCORPORATION OF

02 DEC 13 PM 3: 03

#### BLEU SKIES INSURANCE UNDERWRITERS, INC.

(a Corporation for Profit)

In Compliance with the requirements of Chapter 607, Florida Statutes, the undersigned person (s) do hereby make, subscribe and acknowledge they have voluntarily associated themselves together for the purpose of forming a corporation for profit, the Articles of Incorporation read as follows:

#### **ARTICLE I**

#### NAME

The name of this Corporation is: Bleu Skies Insurance Underwriters, Inc.

#### ARTICLE II

#### PRINCIPAL CORPORATE OFFICE AND ADDRESS

The initial principal office of this corporation shall be located at 2754 West Oakland Park Boulevard, Fort Lauderdale, Florida 33311.

#### ARTICLE III

#### PURPOSE

The purpose of this Corporation is to promote, distribute, provide, and or produce insurance services throughout the marketplace.

#### ARTICLE IV

#### REGISTERED AGENT AND OFFICE

The name and office address of this corporation's registered agent in Florida is Gaila M. Anderson of 1031 Ives Dairy Road, Suite 228, North Miami Beach, FL 33179.

#### ARTICLE V

#### SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

The shareholders will have preemptive rights with respect to additional shares of stock sold by the corporation.

The shareholders will be required to first offer their shares to the corporation before selling to other parties.

#### ARTICLE VI

#### DIRECTORS

The director(s) constituting the initial Board of Directors of the Corporation is one, which number may be increased by further action of the member(s). The name and address of the person(s) who are to serve initially is:

- Carline Wilson, President
   2754 W. Oakland Park Boulevard
   Ft. Lauderdale, FL 33311
- Jacquelin Jean, Vice President
   2754 W. Oakland Park Boulevard
   Ft. Lauderdale, FL 33311

Each director will serve for a term of Two years.

#### **ARTICLE VII**

#### **INCORPORATORS**

The name(s) and addresses of the incorporators to this Articles of Incorporation is (are):

Carline Wilson, 2754 W. Oakland Park Boulevard, Ft. Lauderdale, FL 33311

Jacquelin Jean, 2754 W. Oakland Park Boulevard, Ft. Lauderdale, FL 33311

THE UNDERSIGNED INCORPORATOR (S) HAS (HAVE) EXECUTED

THESE ARTICLES OF INCORPORATION ON

Signature of Incorporator

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

02 DEC 13 PM 3: 03

Signature of Incorporator

Printed Name of Incorporator

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

Gaila Anderson, Registered Agent

12/10/02 Date