

Division of Corporations

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (305) 673-0347  
Fax Number : (305) 532-0738

FLORIDA PROFIT CORPORATION OR P.A.

INSURANCE MARKETING, INC.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$70.00 |

W-35314

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TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### ARTICLE I NAME

The name of the corporation shall be :  
INSURANCE MARKETING, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is :  
1101 GULF BREEZE SUITE 357 A  
GULF BREEZE, FL 32561

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity  
business permitted under the laws of the State of Florida.

### ARTICLE IV SHARES

The number of shares of stock is:  
1500 COMMON SHARES

### ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and

Director :

MICHAEL BUTTS

1101 GULF BREEZE SUITE 357 A  
GULF BREEZE, FL 32561

Director :

JOHN HADDER

1101 GULF BREEZE SUITE 357 A  
GULF BREEZE, FL 32561

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PAGE 2 INSURANCE MARKETING, INC.

ARTICLE VI REGISTERED AGENT

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

MICHAEL BUTTS

1101 GULF BREEZE SUITE 357 A

GULF BREEZE, FL 32561

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

MICHAEL BUTTS

1101 GULF BREEZE SUITE 357 A

GULF BREEZE, FL 32561

ARTICLE VIII EFFECTIVE DATE

The effective date of the corporation is January 1, 2003.

.....  
Having been named as registered agent to accept service of process for the above corporation 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.



Signature / Registered Agent



Date



Signature/Incorporator



Date

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