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SECRETARY OF STAIL
TALLAHASSEE, FLORIGE

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#### TRANSMITTAL LETTER

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

SUBJECT: Moto	rist's Protection Plans	Inc			
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
Enclosed are an orig	ginal and one (1) copy of the artic	les of incorporation and	a check for:		
\$70.00	<b>S</b> 78.75	<b>□ \$</b> 78.75	S87.50		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
	& Certificate of Status	& Certified Copy	Certified Copy		
			& Certificate of Status		
		ADDITIONAL CO	· ·		
FROM:	Roy V. Smith Jr	=	45		
_	Name	(Printed or typed)			
	1145 N. Harbor City Blvd				
	Address				
	Molhomma ET 22025				
	Melbourne, FL 32935				
	City, State & Zip				
	321-253-9333	_ _ <u>v_</u>	*		
	Daytime T	elephone number	<u>~~</u>		

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

FILED

### CORPORATE ARTICLES OF INCORPORATION

03 FEB 13 PM 1: 06

OF

SECRETARY OF STATE TAI LAHASSEE, FLORIDA

#### MOTORIST'S PROTECTION PLANS INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Corporate Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

MOTORIST'S PROTECTION PLANS INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1145 N. Harbor City Blvd Melbourne, Florida 32935

#### ARTICLE III CAPTIAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares of no par value stock.

#### ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:
Roy V. Smith, Jr.
1145 N. Harbor City Blvd
Melbourne, Fl. 32935

#### ARTICLE V INCORPORATOR(S)

The name and street address of the incorporator to these Articles of Incorporation is:

Roy V. Smith, Jr. 1145 N. Harbor City Blvd Merritt Island, Fl. 32935 Melbour Ne,

Roy V. Smith Gr.

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## REGISTERED AGENT\REGISTERED OFFICE SECRETARY OF STATE

Pursuant to the provisions of section 607.0501, 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.

The name of the corporation is:

MOTORISTIS PROTECTION PLAN INC.

The name and address of the registered agent and office is:

Roy V. Smith, Jr. 1145 N. Harbor City Blvd Melbourne, Fl. 32935

TITLE

DATÉ

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE 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 STATUTUES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIARY WITH AND ACCEPT THE OBLICATIONS OF MY POSITION AS REGISTERED AGENT.