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#### TRANSMITTAL LETTER

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

SUBJECT: SENIOR ASSURANCE RESOURCES, INC.

Enclosed is an original and one (1) copies of the Articles of Incorporation and a check for:

[\_] \$70.00 [X] \$78.75 Filing Fee Filing Fee

& Certificate of Status

Filing Fee Filing Fee,
& Certified Copy Certified Copy

& Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Joan Sisto

708 Clubwood Court

Winter Springs, Florida 32708

407-695-6133

# **Articles of Incorporation**

of

## SENIOR ASSURANCE RESOURCES, INC.



In compliance with the requirements of Florida Statutes, Chapter 607, the undersigned, being a natural person, does hereby act as the incorporator in adopting and filing the following Articles of Incorporation for the purpose of organizing a business corporation.

#### ARTICLE I

The name of the corporation ("Corporation") is: Senior Assurance Resources, Inc.

#### **ARTICLE II**

The street address of the principal office of the Corporation is: 708 Clubwood Court, Winter Springs, Florida 32708.

#### ARTICLE III

The purpose for which the corporation has been formed is to engage in any business allowed under the laws of the State of Florida including, but not limited to, financial and estate planning.

## **ARTICLE IV**

The maximum number of shares this Corporation is authorized to issue is one hundred (100) having a \$ 1.00 par value, all of which shall be Common Shares. All Common Shares shall be identical with each other in every respect and the holders thereof shall be entitled to one vote for each share on all matters on which shareholders have the right to vote. The consideration to be paid for each share shall be fixed by the Board of Directors. Common Stock of the corporation shall be issued as "small business corporation" stock in accordance with the plan or plans under the provisions of Section 1244 of the Internal Revenue Code of 1986.

#### ARTICLE V

The initial Board of Directors shall consist of one (1) member. The name and address of the person who will serve on the initial Board of Directors is:

Name Address

Joan Sisto 708 Clubwood Court

Winter Springs, Florida 32708

## **ARTICLE VI**

The initial street address of the Corporation's registered office is 708 Clubwood Court, Winter Springs, Florida 32708. The initial registered agent for the Corporation at that address is Joan Sisto.

## ARTICLE VII

The name and address of the Incorporator is:

Name Address

Joan Sisto 708 Clubwood Court

Winter Springs, Florida 32708

## ARTICLE VIII

The corporation shall indemnify its directors, officers, employees and agents to the fullest extent permitted by law.

#### ARTICLE VIII

The corporation elects to be treated as a "small business corporation" and shall take any and all action necessary to comply with the requirements of the Internal Revenue Service for making an election pursuant to Sub Chapter S of the Internal Revenue Code, Section 1362.

			d, as incorporato		ites these A	rticles of
Incorporation,	this 15"	day of MA	nex	, 2003.		

Joan Sisto Incorporator

STATE OF FLORIDA COUNTY OF ONANGE

BEFORE ME, the undersigned authority, personally appeared JOAN SISTO, to me well known, who, after being duly sworn, deposed and stated that he has read the foregoing and that the same is true and correct.

SWORN TO, acknowledged and subscribed before me this day of Manch 2003.

My Commission Expires: 05/30/04

BERNARD BAZENSKY

OTARY My Comm Exp. 5/30/04

No. CC 918492

De Personally Known (10ther LD.

## ACCEPTANCE OF REGISTERED AGENT

I HEREBY ACKNOWLEDGE, ACCEPT AND AGREE to act as Registered Agent for SENIOR ASSURANCE RESOURCES, INC. DATED this 152k day of MANCH

Sisto Suit

STATE OF FLORIDA COUNTY OF ORAJEC

BEFORE ME, the undersigned authority, an officer duly authorized to administer oaths and take acknowledgments, personally appeared JOAN SISTO, as Registered Agent for SENIOR ASSURANCE RESOURCES, INC., known to me and known by me to be the person who executed the foregoing Acceptance of Registered Agent, and acknowledged before me that he executed the same freely and voluntarily for the purposes therein expressed.

WITNESS my hand and official seal this 15 day of Manch

NOTARY PUBLIC State of Florida

MY COMMISSION EXPIRES: 05/30/04