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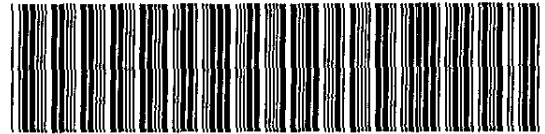
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATION

03 JUL 16 AM 11:09

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TALLAHASSEE, FLORIDA
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OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

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MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. A.I.S. INSURANCE SERVICES, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act hereby adopts the following Articles of Incorporation.

ARTICLE 1 – NAME

The name of the corporation shall be:

A.I.S. Insurance Services, Inc.

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ARTICLE 2 – PRINCIPAL OFFICE

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

**7171 Coral Way
Suite 307
Miami, Florida 33155**

ARTICLE 3 – SHARES

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

One hundred (100) Shares; \$1.00 par value.

ARTICLE 4 – INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Berta M. Sanders
9550 NW 77 Avenue Suite 3
Hialeah Gardens, Florida 33016**

ARTICLE 5 – INCORPORATOR

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

**Shirley Ares-Truy
11189 SW 88 Street Apt G207
Miami, Florida 33176**

ARTICLE 6 – DIRECTORS

The undersigned incorporator has executed these Articles of Incorporation this 26th Day of June, 2003.


Shirley Ares-Truy

**CERTIFICATE OF DESIGNATION REGISTERED
AGENT/REGISTERED OFFICE**

Pursuant To the provisions of sections 607.0501 or 617.0501, Florida statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designation the designation of the registered agent/registered office, in the State of Florida.

- 1.- The name of the Corporation is : **A.I.S. Insurance Services, Inc.**
- 2.- The name and address of the registered agent and office is:

**Berta M. Sanders
9550 NW 77 Avenue Suite 3
Hialeah Gardens, Florida 33016**

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.

Signature: Berta M. Sanders

Date: July 15, 2003

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