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

From: Account Name : YOUR CAPITAL CONNECTION, INC.  
Account Number : I2000000257  
Phone : (850) 224-8870  
Fax Number : (850) 224-7047

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FLORIDA PROFIT CORPORATION OR P.A.

SOUTHERN INSURANCE & FINANCIAL GROUP, INC.

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**ARTICLES OF INCORPORATION  
OF  
SOUTHERN INSURANCE & FINANCIAL GROUP, INC  
7443 NORTH WEST 57<sup>TH</sup> STREET  
TAMARAC, FLORIDA 33319**

**ARTICLE I**

*The name of the corporation is SOUTHERN INSURANCE & FINANCIAL GROUP, INC.  
7443 NORTH WEST 57<sup>TH</sup> STREET TAMARAC, FLORIDA 33319*

**ARTICLE II - PURPOSE**

*This corporation is organized for the purpose of transacting any and all lawful business.*

**ARTICLE III - CAPITAL STOCK**

*This corporation is authorized to issue 1,000 shares of ONE DOLLAR (\$1.00) par value stock, which shall be designated as "COMMON STOCK".*

**ARTICLE IV - PREEMPTIVE RIGHTS**

*Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he/she already holds, shall have the right to purchase his/her prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.*

**ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT**

*The street address of the initial registered office of this corporation is 7443 NORTH WEST 57<sup>TH</sup> STREET TAMARAC, FLORIDA 33319, and the name of the initial registered agent of this corporation at this address is CARL S. PITTER.*

**ARTICLE VI - INITIAL BOARD OF DIRECTORS**

*This corporation shall have TWO director(s) initially. The number of directors may be either increased or diminished from time to time by the By-Laws but shall never be less than one. The name and address of the initial director(s) of this corporation is/are:*

**NEVILLE O. MARTIN  
7443 NORTH WEST 57<sup>TH</sup> STREET  
TAMARAC, FLORIDA 33319**

**MAXINE E. MARTIN  
7443 NORTH WEST 57<sup>TH</sup> STREET  
TAMARAC, FLORIDA 33319**

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**ARTICLE VII - OFFICERS**

*The name and address of the initial officers of the corporation are:*

**PRESIDENT:**

**NEVILLE O. MARTIN  
7443 NORTH WEST 57<sup>TH</sup> STREET  
TAMARAC, FLORIDA 33319**

**VICE PRESIDENT**

**MAXINE E. MARTIN  
7443 NORTH WEST 57<sup>TH</sup> STREET  
TAMARAC, FLORIDA 33319**

**TREASURER:**

**NEVILLE O. MARTIN  
7443 NORTH WEST 57<sup>TH</sup> STREET  
TAMARAC, FLORIDA 33319**

**SECRETARY**

**MAXINE E. MARTIN  
7443 NORTH WEST 57<sup>TH</sup> STREET  
TAMARAC, FLORIDA 33319**

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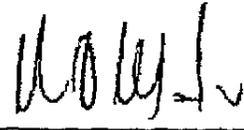
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**ARTICLE VIII - INCORPORATOR**

*The name and address of the person signing these ARTICLES is:*

**NEVILLE O. MARTIN  
7443 NORTH WEST 57<sup>TH</sup> STREET  
TAMARAC, FLORIDA 33319**

*IN WITNESS THEREOF, the undersigned subscriber has executed these ARTICLES OF INCORPORATION on the 6<sup>TH</sup> Day of OCTOBER 2003*

X 

**(STATE OF FLORIDA  
COUNTY OF BROWARD)**

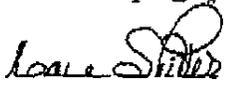
*BEFORE ME, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared NEVILLE O. MARTIN known to me and known by me to be the person who executed the foregoing ARTICLES OF INCORPORATION, and he/she acknowledged before me that he/she executed those ARTICLES OF INCORPORATION.*

*IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 6<sup>TH</sup> day of OCTOBER, 2003*

X \_\_\_\_\_  
**NOTARY PUBLIC STATE OF FLORIDA**

**ACCEPTANCE OF RESIDENT AGENT**

*Having been named to accept service of process for the abovestated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.*

  
\_\_\_\_\_  
**RESIDENT AGENT: CARL S. PITTER**

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