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(City/State/Zip/Phone #)

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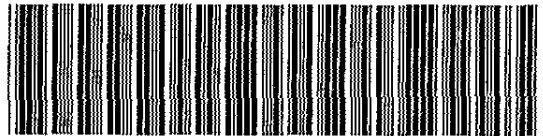
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11/20/03

Requestor's Name

Address

City

State

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Phone

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CORPORATION(S) NAME

Assurance International, Inc.

☒ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

☐ Certificate Under Seal

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Verifier

Acknowledgment

W P Verifier

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Empire Toll Free: 1-800-432-3028

ARTICLES OF INCORPORATION

of

ASSURANCE International, INC.
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

ASSURANCE International, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue One Hundred shares (100) of One Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	Amel Lyden JACQUELINE CONLIFFE
ADDRESS	2781 South West 4 th CT.
CITY	FT. Lauderdale FLORIDA Florida ZIP 33313

The principal office, if known, or the mailing address of the corporation is:

NAME	ASSURANCE International, INC.
ADDRESS	2781 South West 4 th CT.
CITY	FT. Lauderdale FLORIDA Florida ZIP 33313

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ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) directors 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 (1). The names and addresses of the initial director(s) of the corporation are as follows:


NAME	<u>Amiel LYNCH</u>		
ADDRESS	<u>2781 South West 4th CT.</u>		
CITY	<u>FT. Lauderdale</u>	STATE	<u>Florida</u> ZIP <u>33313</u>
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	<u>Amiel LYNCH</u>		
ADDRESS	<u>2781 South West 4th CT.</u>		
CITY	<u>FT. Lauderdale</u>	STATE	<u>Florida</u> ZIP <u>33313</u>
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 20th day of NOVEMBER, 2003.

 (Seal)
____ (Seal)
____ (Seal)

CERTIFICATE AND KNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

ASSURANCE INTERNATIONAL, INC.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 2781 SW 4TH COURT
FORT LAUDERDALE, FL 33312

has named JACQUELINE CONLIFFE
located at the aforesaid address, as its Registered Agent to accept service of process within
this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated
corporation at the place designated in this certificate, and being familiar with the obligations
of that position, I hereby accept to act in this capacity, and agree to comply with the
provisions of Florida Law in keeping open said office.

Jacqueline Conliffe
(registered agent)

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