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(Requestor's Name)

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☐ PICK-UP

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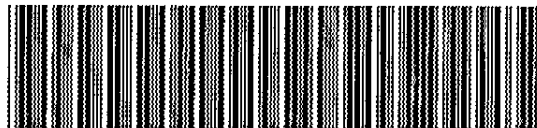
(Business Entity Name)

(Document Number)

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**LAZARUS CORPORATE FILING SERVICE**

**3320 S.W. 87 AVENUE**

**MIAMI, FLORIDA (305)552-5973**

OFFICE USE ONLY

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

1. A & A INSURANCE UNDERWRITERS, 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

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Examiner's Initials

**ARTICLES OF INCORPORATION  
OF  
A & A INSURANCE UNDERWRITERS, INC.**

The undersigned, for the purpose of forming a corporation for profit under Florida law adopt the following articles of incorporation:

**ARTICLE ONE: NAME**

The name of the corporation is A & A INSURANCE UNDERWRITERS, INC.

**ARTICLE TWO: DURATION**

This corporation shall exist perpetually.

**ARTICLE THREE: PURPOSE**

The general purpose or purposes for which this corporation is being formed are to include transactions of any or all lawful business permitted under the laws of the State of Florida.

**ARTICLE FOUR: CAPITAL STOCK**

This corporation is authorized to issue one thousand (1000) shares of common stock of a par value of \$1.00 per share.

**ARTICLE FIVE: PREEMPTIVE RIGHTS GRANTED**

Each shareholder of any class of stock of this corporation shall be entitled to full preemptive rights to purchase any unissued or treasury shares of the corporation and any securities of the corporation convertible into or carrying a right to subscribe to or acquire any unissued or treasury shares.

**ARTICLE SIX: REGISTERED AND PRINCIPAL OFFICE**

The street address of the initial and principal registered office of the corporation is 7975 Northwest 155<sup>th</sup> Street, Suite A, Miami Lakes, Florida 33016 and the name of the initial registered agent at that address is WALTER A. ANON.

**ARTICLE SEVEN: DIRECTORS**

This corporation shall have one director initially. The number shall be fixed by the by-laws and may be changed from time to time. The name and address of the initial directors of the board are:

NAME	ADDRESS
WALTER A. ANON	7975 Northwest 155 <sup>th</sup> Street, Suite A Miami Lakes, Florida 33016

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They shall hold office until the first annual meeting of stockholders.

**ARTICLE EIGHT: INCORPORATORS**

The name and street address of the incorporators are:

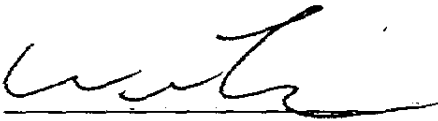
NAME

ADDRESS

WALTER A. ANON

7975 Northwest 155<sup>th</sup> Street, Suite A  
Miami Lakes, Florida 33016

IN WITNESS WHEREOF, I have subscribed my name this 17<sup>th</sup> day of February, 2004.



WALTER A. ANON

STATE OF FLORIDA     )  
                                  )  
COUNTY OF DADE     )

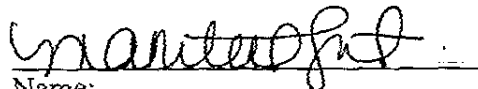
SS:

On this 17<sup>th</sup> day of February, 2004, before me a notary public in the State of Florida, personally appeared WALTER A. ANON known to me to be the person whose name is subscribed to in the foregoing Articles of Incorporation, and acknowledges that he has executed the same for the purpose contained therein.

IN WITNESS WHEREOF, I hereunto set my hand and official seal the date first above written.



Marlene Souto  
My Commission DD192803  
Expires March 12, 2007



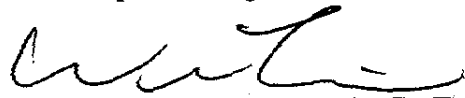
Name:

Notary Public STATE OF FLORIDA

My Commission expires:

**ACCEPTANCE OF REGISTERED AGENT**

I, the undersigned, hereby accept the appointment as Registered Agent of the above noted corporation. I am familiar with, and accept the obligations of, Section 607.325 of the Florida Statutes.



WALTER A. ANON.  
REGISTERED AGENT

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