

PO4000041302

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H04000051401 3)))

03/15/04

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

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

From:

Account Name : FLORIDA INCORPORATORS, INC.  
Account Number : 075350000473  
Phone : (305) 379-7907  
Fax Number : (305) 402-3141

FLORIDA PROFIT CORPORATION OR P.A.

Kozak Claims Agency Inc.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 04      |
| Estimated Charge      | \$78.75 |

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 MAR -9 PM 2:16

Electronic Filing Menu

Corporate Filing

Public Access Help

Kozak

H04000051401

Articles Of Incorporation  
Of

Kozak Claims Agency Inc.

FILED  
03/15/04

THE UNDERSIGNED, ACTING AS INCORPORATOR OF A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION:

FIRST: The name of the corporation is Kozak Claims Agency Inc.

SECOND: The period of its duration is perpetual.

THIRD: The date of the commencement of the corporate existence shall be March 15, 2004.

FOURTH: The purpose or purposes for which the corporation is organized is to engage in the transaction of any or all lawful business for which the corporation may be incorporated under the provisions of the Florida Business Corporation Act.

FLORIDA INCORPORATORS, INC.  
8875 Hidden River Pkwy, Ste 300 1  
Tampa, FL 33637  
(813) 632-7882

H04000051401

FILED  
04 MAR -9 PM 2:16  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

H04000051401

FIFTH: The aggregate number of shares which the corporation shall have authority to issue is ONE THOUSAND (1,000) SHARES of capital stock, \$.001 par value each.

SIXTH: The number of directors constituting the initial Board of Directors of the corporation is ONE (1) and the name and address of the person who is to serve as director until the first annual meeting of shareholders or until his successor is elected and qualified is:

Joseph Kozak  
223 Imperial Lane  
Lauderdale By The Sea, FL 33308

SEVENTH: The name and address of the incorporator is:

Mark Hankins  
8875 Hidden River Parkway, Suite 300  
Tampa, FL 33637-2087

EIGHTH: The name and address of the initial registered agent and the initial registered office is:

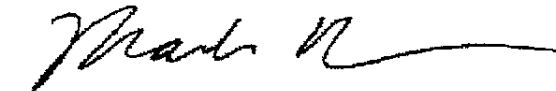
H04000051401

H04000051401  
Florida Incorporators, Inc.  
8875 Hidden River Parkway, Suite 300  
Tampa, FL 33637-2087

NINTH: The mailing address and principal office of  
the corporation is:

Kozak Claims Agency Inc.  
223 Imperial Lane  
Lauderdale By The Sea, FL 33308

DATED: March 9, 2004

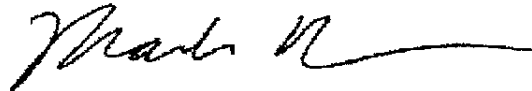


MARK HANKINS  
Incorporator

ACCEPTANCE OF REGISTERED AGENT

I hereby am familiar with and accept the duties and  
responsibilities as registered agent of the corporation.

FLORIDA INCORPORATORS, INC.



By: \_\_\_\_\_  
MARK HANKINS, President

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 MAR -9 PM 2:16