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Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

continental insurance agency of south florida, inc.

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 14, 2004

EMPIRE

SUBJECT: CONTINENTAL INSURANCE AGENCY OF SOUTH FLORIDA, INC.

REF: W04000045516

We have received your document for CONTINENTAL INSURANCE AGENCY OF SOUTH FLORIDA, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

An effective date may be added to the Articles of Incorporation if a 2005 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Cynthia Blalock Document Specialist New Filings Section FAX Aud. #: E04000245285 Letter Number: 304A00069561

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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ARTICLES OF INCORPORATION

OF

CONTINENTAL INSURANCE AGENCY OF SOUTH FLORIDA, INC.

I, the undersigned incorporator of this corporation under Florida Statute 607, as amended, do hereby associate myself to form a corporation and adopt the following Articles of Incorporation.

ARTICLE I

CONTINENTAL INSURANCE AGENCY OF SOUTH FLORIDA. INC.

The name of this corporation is:

CONTINENTAL INSURANCE AGENCY OF SOUTH FLORIDA,

The principal office is located at 835 North Homestead Boulevard, Homestead, Florida 33030.

ARTICLE II

PURPOSE AND NATURE OF BUSINESS

The purpose of this corporation and general nature of the business to be conducted are as follows:

To engage in any business activity or endeavor which is lawful under the laws of the State of Florida, and the United States of America.

ARTICLE III

DURATION OF CORPORATION

This corporation is to have perpetual existence commencing on the date of execution and acknowledgment of these Articles of

HOUDO

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Incorporation.

ARTICLE IV

CAPITAL STOCK

The maximum number of shares of stock which this corporation is authorized to have outstanding at any one time is one hundred (100) shares of Common Stock, each share having no par value.

ARTICLE V

INITIAL CAPITAL CONTRIBUTION

The amount of capital with which this corporation shall begin business shall not be less than Five Hundred (\$500.00) Dollars.

ARTICLE VI

SUBSCRIBERS

The names and addresses of the subscribers of these Articles of Incorporation and the number of shares they have elected to take are as follows:

SUBSCRIBER	ADDRESS	number of <u>Shares</u>
MARIA CRESPO	835 North Homestead Blvd. Homestead, Florida 33030	100

ARTICLE VII

DIRECTORS

The initial number of Directors of this corporation shall be one (1). The number of Directors may be increased from time to time by a vote of the stockholders in conformity with the By-Laws

of the Corporation but shall never be less than one (1).

ARTICLE VIII

INITIAL BOARD OF DIRECTORS

The names and addresses of the members of the initial Board of Directors who, subject to the provisions of the Certificate of Incorporation, the By-Laws and the corporation Laws of the State of Florida, shall hold office for the first year of the corporation's existence, or until his or her successors are elected and qualified, are:

NAME

ADDRESS

MARIA CRESPO

835 North Homestead Blvd. Homestead, Florida 33030

ARTICLE IX

VOTING RIGHTS

Except as otherwise provided by law, the entire voting power for the election of Directors and for all other purpose shall be vested exclusively in the holders of the outstanding common shares.

ARTICLE X

PRE-EMPTIVE 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 or she already holds, shall have the right to purchase his or her pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE XI

INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 835 North Homestead Boulevard, Homestead, Florida 33030, and the name of the initial Registered Agent of this corporation at that address is MARIA CRESPO.

ARTICLE XII

INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former Officer or director, to the full extent permitted by law.

DATED this 14h day of from the 2004.

MARIA CRESPO

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

BEFORE ME, the undersigned authority, personally appeared MARIA CRESPO, to me well known to be the person described in and who acknowledged before me, according to law, that she made and subscribed the same for the purpose therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at Miami-Dade County, State of Florida, this Win day of Decrypt. 2004.

My Commission Expires:

NOTARY PUBLIC - STATE OF FLORIDA Print Name: G. M. AMOON

Gina M. Amadoi My Commission 90249298 Expires August 20, 2007

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE PURPOSE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED:

FIRST, THAT CONTINENTAL INSURANCE AGENCY OF SOUTH FLORIDA, INC., IS DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT 835 North Homestead Boulevard, Homestead, Florida 33030, STATE OF FLORIDA, HAS NAMED MARIA CRESPO, AT 835 North Homestead Boulevard, Homestead, Florida 33030, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

Signature: James House Signature: MARIA CRESPO SSEC AT COMMENT OF THE COMMENT OF

Having been named to accept services of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Signature

MARIA CRESTO

Date (2)14/04

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