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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Terence	J. Hanbury insurance Agency, (PROPOSED CORPORA	Incorporated TE NAME - MUST INCL	UDESURRX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	•	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	Terence J. Hanbury Name (Printed or typed)		
	754 Cabi	e Beach Lane, Address	***************************************
		each, Florida, 33410 , State & Zip	
		987 Cel: 561 601-8911	

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be:

Terence J. Hanbury Insurance Agency, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 754 Cable Beach Lane, North Palm Beach, Florida 33410

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Business

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Terence J. Hanbury, President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Terence J. Hanbury 754 Cable Beach Lane North Palm Beach, Florida 33410

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Terence J. Hanbury 754 Cable Beach Lane North Palm Beach, Florida 33410

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent 03/21/2005

| level | farelle | 03/21/2005
| Signature/Recorporator Date