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## TRANSMITTAL LETTER

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

SUBJECT: MINILLO INSURANCE GROUP, INC. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$\begin{align\*} \\$70.00 \\$78.75 \\ \\$1\) \\$78.75 \\ \\$87.50 \\ \\$2\) \\$78.75 \\ \\$2\) \\$Certificate of Status

\$\text{Certificate of Status} \\
\$\text{ADDITIONAL COPY REQUIRED}

FROM: MARCIE MARTINEZ

Name (Printed or typed)

15331 NW 4th Street

Address

PEMBROKE Pines FL 33028

City, State & Zip

Daytime Telephone number

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)	FIL 05 MAY 16 SLOKETAR TALLAHASS
	ARTICLE I NAME The name of the corporation shall be:	FILED 116 AM 1ANY OF IASSEE, F
	MINNILLO INSURANCE GROUP, INC.	)   <b>8: 49</b>   SiAIL   LORIDA
	ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	<b>&gt;</b> , —
	15001 NW 4th STREET, PEUBROKE Pines, FL.	33028
	ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
	Provide Insulance Services	
	ARTICLE IV SHARES The number of shares of stock is:	
	ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Preside	List name(s), address(es) and specific title(s): HMARQIE MARTINEZ 15331 NW 4HM STREET PEUBROK	e Pines FL
itee Tes;da	H-ERNESTO MAINTINEZ 15831 NW 4th STREET PENBROKE	Pines FL 330
	ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  MARCIE MARTICLE VI  REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
,	15331 NW 4th STREET PENGROKE Pines, FL 3302B	
	ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
	ERNESTO MARTINEZ	
	Pauploke Pines IL 3308	
	Having been named as registered agent to accept service of process for the above stated corporation at the pl	***************
	certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	
	Signature/Registered Agent Date	05
	Signature/Incorporator 5/12/10	25
~	Date	-