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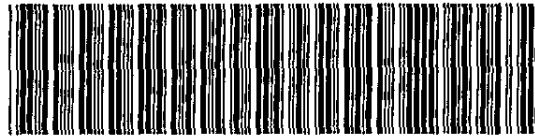
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TALAHASSEE, FLORIDA

2005 JUN 21 A 8:04

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TRANSMITTAL LETTER

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

SUBJECT: LAB Insurance, Inc.

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation. A check is enclosed in the amount of \$122.50.

*FROM: Laurence Brown
9635 Boca Gardens Circle N., Unit B, Boca Raton, FL 33496-1773*

ARTICLES OF INCORPORATION
OF
LAB Insurance, Inc.

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CLERK OF CIRCUIT COURT
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be LAB Insurance, Inc.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
9635 Boca Gardens Circle N., Unit B, Boca Raton, FL 33496-1773.

ARTICLE III - CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any time is one thousand (1000) shares. Such shares shall be of a single class of common stock and have \$1.00 par value.

ARTICLE IV - INITIAL REGISTERED AGENT & ADDRESS

The name and address of the initial registered agent is Laurence Brown, 9635 Boca Gardens Circle N., Unit B, Boca Raton, FL 33496-1773.

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is Laurence Brown, 9635 Boca Gardens Circle N., Unit B, Boca Raton, FL 33496-1773.

ARTICLE VI - EXISTENCE

The corporation shall have perpetual existence.

ARTICLE VII - NATURE OF BUSINESS

This corporation may engage or transact business as an insurance agent and in any or all lawful activities or business permitted under the laws of the United States, The State of Florida or any other state, country, territory or nation.

ARTICLE VIII - DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have one Director, initially, the name and street address of the initial member of the Board of Directors is:

Laurence Brown, 9635 Boca Gardens Circle N., Unit B, Boca Raton, FL 33496-1773

The undersigned have executed these Articles of Incorporation this 16th day of June, 2067.

Laurence Brown

Signature/title

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the Corporation is LAB Insurance, Inc.
2. The name and address of the registered agent and office is:

Laurence Brown, 9635 Boca Gardens Circle N., Unit B, Boca Raton, FL 33496-1773

Signature Laurence Brown
Title President
Date 6/16/05

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature Laurence Brown
Title President