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Attorney at Law

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November 15, 2005

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

Re: Larsen Insurance Associates, Inc.

Dear Clerk:

Enclosed is the original and one copy of the Articles of Incorporation for the above-referenced corporation. Also, enclosed is a check in the amount of \$78.50 for payment of the following items:

Filing Fee	\$ 35.00
Registered Agent Fee	\$ 35.00
Certified Copy	<u>\$ 8.75</u>
	\$ 78.75

Please file the Articles, certifying them as the Articles of Incorporation, and returning a certified copy to my office. Thank your for your time and assistance in this matter.

Very truly yours,



Ronald P. Cullinan, Esquire

RPC/nen
Enclosures

**ARTICLES OF INCORPORATION
OF
LARSEN INSURANCE ASSOCIATES, INC.**

FILED

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ARTICLE I - NAME OF BUSINESS

TALLAHASSEE, FLORIDA

The name of the corporation is: LARSEN INSURANCE ASSOCIATES, INC.

ARTICLE II - NATURE OF BUSINESS

The general nature of the business to be transacted by this Corporation is to engage in any and all business permitted under the laws of the State of Florida.

ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to issue and have outstanding at any one time is 1,000 shares of common stock with no par value.

ARTICLE IV - TERM OF EXISTENCE

This Corporation shall have perpetual existence.

**ARTICLE V - REGISTERED AGENT, REGISTERED OFFICE
AND PRINCIPAL ADDRESS**

The Registered Agent, Registered Office and Principal address of the initial Registered Office of this Corporation is in the State of Florida as follows:

MARK LARSEN
3621 Cold Creek Drive
Valrico, Florida 33594

The Board of Directors from time to time may move the Registered Office to any other address in the state of Florida.

ARTICLE VI - BOARD OF DIRECTORS

This Corporation shall have one (2) directors initially. The number of directors may be increased or diminished from time to time by Bylaws adopted by the stockholders.

However, there shall never be less than one (1) director.

ARTICLE VII - INITIAL DIRECTORS

The name of the initial director(s) of this Corporation and his/her/their street address(es) are as follows:

President: Mark Larsen
3621 Cold Creek Drive
Valrico, Florida 33594

Secretary Jennifer M. Larsen
3621 Cold Creek Drive
Valrico, Florida 33594

Treasurer Jennifer M. Larsen
3621 Cold Creek Drive
Valrico, Florida 33594

The person(s) named as initial director(s) shall hold office for the first year of existence of this Corporation or until his/her/their successor(s) are elected or appointed and qualified, whichever occurs first.

ARTICLE VIII - INCORPORATOR

The name and street address of the person signing these Articles of Incorporation as the Incorporator is as follows:

Mark Larsen
3621 Cold Creek Drive
Valrico, Florida 33594

IN WITNESS WHEREOF, the undersigned, as Incorporator, has executed the following Articles of Incorporation on this 11 day of November, 2005.

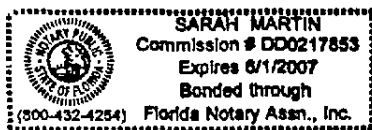

Mark Larsen Incorporator

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

I HEREBY CERTIFY, that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared MARK LARSEN, who [] is personally known to me or [✓] has produced the following as identification _____ and who executed the foregoing Articles of Incorporation of his own will and deed.

SWORN AND SUBSCRIBED before me this 11th day of November, 2005.



Sarah Martin
NOTARY PUBLIC, STATE OF FLORIDA

Sarah Martin
PRINT NOTARY NAME

My Commission Expires:

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the law of the State of Florida, submits the following statement in designing the registered office and registered agent, in the State of Florida.

1. The name of the corporation is: **LARSEN INSURANCE ASSOCIATES, INC.**

2. The name and address of the registered agent and office is:

Mark Larsen
3621 Cold Creek Drive
Valrico, Florida 33594

Signature: 
Mark Larsen d

Title: President

Date: 11/11/05

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: 
Mark Larsen

Date: 11/11/05