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FILED  
06 JAN 25 PM 1:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: KAREN MORROW INSURANCE SERVICES, INC.  
(Proposed corporate name - must include suffix)

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

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: JAMES SIMPSON  
Name (Printed or typed)

771 SW South MACEDO Blvd  
Address

Port St. Lucie, Florida 34983  
City, State & Zip

(561) 873-1818  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

**OF**

**KAREN MORROW INSURANCE SERVICES, INC.**

FILED  
06 JAN 26 PM 1:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I. NAME**

The name of this corporation shall be:

**KAREN MORROW INSURANCE SERVICES, INC.  
455 SE KITCHING CIRCLE  
STUART, FLORIDA 34994**

**ARTICLE II. INITIAL REGISTERED OFFICE AND MAILING ADDRESS**

The street address of the initial registered office of this corporation is 455 SE Kitching Circle, STUART, FLORIDA 34994.

**ARTICLE III. CAPITALIZATION**

The aggregate number of shares which the corporation is authorized to issue is 1,000. Such shares shall be of a single class, and shall have a par value of \$1.00 per share.

**ARTICLE IV. INITIAL REGISTERED AGENT**

The name and address of the initial registered agent is:

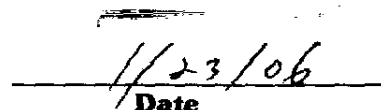
**KAREN MORROW  
455 SE KITCHING CIRCLE  
STUART, FLORIDA 34994**

**ARTICLE V. INCORPORATOR**

The name and address of the Incorporator to these Articles of Incorporation are:

**KAREN MORROW  
455 SE KITCHING CIRCLE  
STUART, FLORIDA 34994**

  
Signature/Incorporator

  
Date

## ARTICLE VI. INITIAL BOARD OF DIRECTORS

This Corporation shall have the following Director initially. The number of directors may be either increased or decrease from time to time in accordance with the provisions of the By-Laws. The name and address of the initial Director of this Corporation is:

President - Karen Morrow  
455 SE Kitching Circle  
Stuart, Florida 34994

*Having been named as the registered agent and to accept service 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/Registered Agent


  
Date

### STATE OF FLORIDA COUNTY OF ST. LUCIE

The foregoing instrument was acknowledged before me this 23rd day of January 2006 by Karen Morrow who is personally known to me or who has produced a Florida State Drivers License as identification and who did not take an oath.

Print Name: JAMES C. SIMPSON  
NOTARY



  
James C. Simpson  
Commission # DD137578  
Expires Sep. 13, 2006  
Bonded Thru  
Atlantic Bonding Co., Inc.