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COVER LETTER

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

SUBJECT: Carib	bean Public Adjusters	, Inc.			
-	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	d a check for:		
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	<u> </u>	06 KaR	
FROM:	Name	co E. Rivera e (Printed or typed) W 141 Ave	AHASSE FLORIDA	GR 13 AH 10:30	
		Address L 33175 , State & Zip	D	Ö	
	(786) 5	S86-3167			

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

Daytime Telephone number

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Caribbean Public Adjusters, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3259 SW 141 AVE Miami, FL 33175

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Public Adjusters

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Francisco E. Rivera, 3259 SW 141 Ave Miami FL 33175, President

REGISTERED AGENT

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

Francisco E. Rivera 3259 SW 141 AVE Miami, FL 33175

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Felix Mollinedo 5775 SW 153 CT Miami, FL 33193

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

Signature/Registered Agent

Signature/incorporator

FELIX MOLLINEDO Notary Public - State of Florida Commission Expires Feb 5, 2010 Commission # DD 514760

Bonded By National Notary Ass