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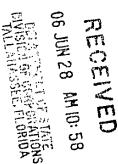
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CORPORATE FILING SERVICE 3320 SW 87TH AVENUE MIAMI, FL 33165 305-552-5973

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time Certified Copy ☐ Mail out ☐ Will wait Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** N Profit Amendment Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Domestication . . . ☐ Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report ☐ Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF INCORPORATION

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 1 NAME

The name of the corporation shall be: CLAIM MASTERS PUBLIC ADJUSTERS, INC

ARTICLE II PRINCIPAL OFFICE

The principle place of business and mailing address of this corporation be:

304 RACQUET CLUB RD # 202 WESTON ,FL 33326-0000

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: FIVE (500) HUNDRED SHARES ONE DOLLAR (1) PER VALUE COMMON STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ALBERTO ABIN 304 RACQUET CLUB RD # 202 WESTON, FL 33326-0000

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

ALBERTO ABIN
304 RACQUET CLUB RD #202
WESTON, FL 33326-0000

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

ALBERTO ABIN (PRESIDENT & SECRETARY) 304 RACQUET CLUB RD # 202 WESTON, FL 33326-0000

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	Signature
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	ator(s) has (have) executed and of JUNE

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/ registered agent, in the State of Florida.

1.	The name of the corporation is: CLAIM MASTERS PUBLIC ADJUSTERS, I	NC
2.	The name and address of the registered agent and office is:	
	ALBERTO ABIN	
	(NAME)	
	304 RACQUET CLUB RD # 202	
	(P.O. BOX NOT ACCEPTABLE)	
	WESTON, FL 33326-0000	
	(CITY/STATE/ZIP)	

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 A REGISTERED AGENT.

06/26/2006