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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ROBERTS & LAW, P.A.**

ATTORNEYS AT LAW

POST OFFICE BOX 57

250 S. MAIN AVENUE

GROVELAND, FLORIDA 34736

TELEPHONE NUMBER: (352) 429-2183

FAX NUMBER: (352) 429-3035

ARTHUR E. ROBERTS  
(1929-1997)

JULIA R. LAW

October 6, 2006

Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Re: South Lake Insurance, Inc.

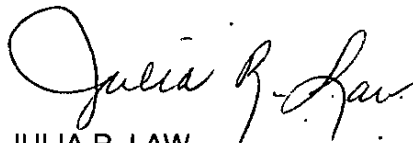
Gentlemen:

Relative to the subject new corporation, enclosed please find the original and one copy of the articles of incorporation, which I would appreciate your filing and returning the copy to me certified.

Also enclosed is my trust account check in the amount of \$78.75, representing the \$35.00 filing fee, \$8.75, for certified copy, and \$35.00 for registered agent fee.

Thanking you for your assistance in this matter, I remain

Sincerely,



JULIA R. LAW

JRL/bs

Enclosures

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2006 OCT -9 PM 3:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION  
OF  
SOUTH LAKE INSURANCE, INC.**

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby sets forth his intention to form a corporation under the laws of the State of Florida.

**ARTICLE I**

The name of this corporation is SOUTH LAKE INSURANCE, INC.

**ARTICLE II**

This corporation shall exist perpetually.

**ARTICLE III**

This corporation is organized for the purpose of transacting any or all lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes.

**ARTICLE IV**

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 10,000 shares of common stock having a par value of \$1.00 per share.

#### ARTICLE V

The principal office of this corporation in the State of Florida is 11910 Compton Road, Clermont, Florida. The Registered Agent for this corporation at this address is SCOTT TAYLOR FLOWERS. The Board of Directors may from time to time move the registered office to any other address in Florida.

#### ARTICLE VI

The corporation shall have two directors initially, whose name and address are:

SCOTT TAYLOR FLOWERS, 11910 Compton Road, Clermont, Florida 34714

JEAN S. FLOWERS, 11910 Compton Road, Clermont, Florida 34714.

#### ARTICLE VII

The names and addresses of the incorporators of this corporation are:  
SCOTT TAYLOR FLOWERS, 11910 Compton Road, Clermont, Florida 34714  
JEAN S. FLOWERS, 11910 Compton Road, Clermont, Florida 34714.

#### ARTICLE VIII

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders, and approved at a stockholders' meeting by a three-quarters majority of the stock entitled to vote thereon, unless all the Directors and all the stockholders sign a written statement manifesting their intention that a certain amendment to these Articles of Incorporation be made.

ARTICLE IX

Shares of stock in this corporation may be transferred only as provided in the By-Laws of the corporation existing and in force at the time such transfer is desired.

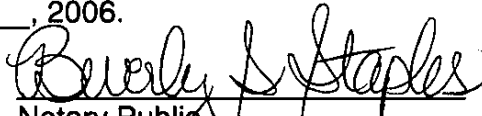
  
SCOTT TAYLOR FLOWERS

  
JEAN S. FLOWERS

STATE OF FLORIDA  
COUNTY OF LAKE

I HEREBY CERTIFY THAT ON THIS DAY BEFORE ME, a Notary Public, duly authorized in the State and County named above to take acknowledgments, personally appeared SCOTT TAYLOR FLOWERS, who is personally known to me, or who produced \_\_\_\_\_, who is the incorporator in the foregoing Articles of Incorporation, and acknowledged that he subscribed to these Articles of Incorporation.

WITNESS my hand and seal in the County and State named above this  
15<sup>th</sup> day of September, 2006.

  
Notary Public

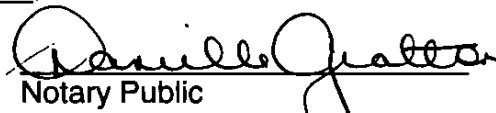


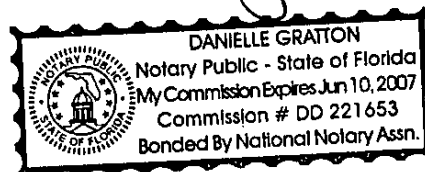
Beverly S. Staples  
MY COMMISSION # DD170446 EXPIRES  
January 15, 2007  
BONDED THROUGH FAIR INSURANCE, INC.

STATE OF FLORIDA  
COUNTY OF ~~LAKE~~ BREVARD

I HEREBY CERTIFY THAT ON THIS DAY BEFORE ME, a Notary Public, duly authorized in the State and County named above to take acknowledgments, personally appeared JEAN S. FLOWERS, who is personally known to me, or who produced FL04F462-477-63-671-0, who is the incorporator in the foregoing Articles of Incorporation, and acknowledged that she subscribed to these Articles of Incorporation.

WITNESS my hand and seal in the County and State named above this 22<sup>nd</sup> day of September, 2006.

  
Notary Public



**STATE OF FLORIDA  
DEPARTMENT OF STATE**

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE  
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM  
PROCESS MAY BE SERVED AND NAMES AND ADDRESSES OF THE OFFICERS  
AND DIRECTORS.**

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**The following is submitted, in compliance with Chapter 607.034, Florida Statutes:**

**SOUTH LAKE INSURANCE, INC.**, a corporation organized (or organizing) under the laws of the State of Florida, with its principal office at 11910 Compton Road, in the City of Clermont, County of Lake, State of Florida, has named SCOTT TAYLOR FLOWERS, located at 11910 Compton Road, Clermont, Florida 34714, as its agent to accept service of process within this state.

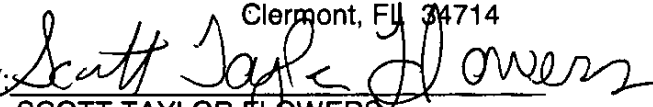
**OFFICERS:**

<b>Name:</b>	<b>Title</b>	<b>Specific Address</b>
SCOTT TAYLOR FLOWERS	President	11910 Compton Road Clermont, FL 34714
JEAN S. FLOWERS	Secretary/ Treasurer	11910 Compton Road Clermont, FL 34714

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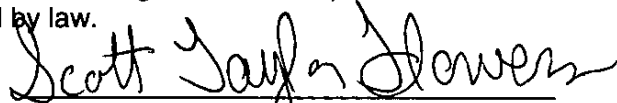
**DIRECTORS:**

<b>Name</b>	<b>Specific Address</b>
SCOTT TAYLOR FLOWERS	11910 Compton Road Clermont, FL 34714
JEAN S. FLOWERS	11910 Compton Road Clermont, FL 34714

BY:   
SCOTT TAYLOR FLOWERS  
President

**ACCEPTANCE:**

I agree as Registered Agent to accept service of process; to keep office open during prescribed hours; to post my name (and any other officers of said corporation authorized to accept service of process at the above Florida designated address) in some conspicuous place in the office as required by law.

  
\_\_\_\_\_  
SCOTT TAYLOR FLOWERS,  
Registered Agent



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

PURSUANT TO THE PROVISIONS OF SECTION 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 AGENT/REGISTERED OFFICE, IN THE STATE  
OF FLORIDA.

1. The name of the corporation is SOUTH LAKE INSURANCE, INC.
2. The name and address of the registered agent and office is SCOTT  
TAYLOR FLOWERS. 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.

  
SCOTT TAYLOR FLOWERS  
Registered Agent

Date: 9-15-06