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(Business Entity Name)

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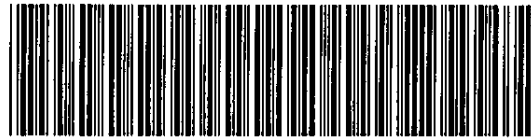
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W06-9878 NOV 14 2006

COVER LETTER

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

SUBJECT: HD Martinez Insurance Group
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Hector D. Martinez
Name (Printed or typed)

6365 Taft St. # 1005
Address

Hollywood, FL 33024
City, State & Zip

(786) 246-7053
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 NOV 13 AM 11:33

FILED

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

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: **HD Martinez Insurance Group Inc.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: **6365 Taft St #1005
Hollywood, Fl 33024**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **Insurance Sales**

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):

**Hector D. Martinez - President
6365 Taft St #1005
Hollywood, Fl 33024**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

**Hector D. Martinez
6365 Taft St #1005
Hollywood, Fl 33024**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**Hector D Martinez
6365 Taft St #1005 Hollywood, Fl 33024**

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

Hector Danny Martinez

Signature/Registered Agent

11-05-2006

Date

Hector Danny Martinez

Signature/Incorporator

11-05-2006

Date