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9/06/17

FLORIDA DIVISION OF CORPORATIONS
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((H08000034050 7))

TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: ROLAND D. WALLER
CONTACT: ANGIE BERKEY
PHONE: (727)847-2288

ACCT#: I20000000068

FAX #: (727)848-4183

NAME: STATES, INC.

AUDIT NUMBER.....H08000034050

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

PAGES..... 3

CERT. COPIES.....1

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To: RelayFax via port COM10

From: N/A

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FEB-7-2008 03:06P FROM:STOCKWELL KNIGHT REA
FEB-01-2008(1RU) 13:20 WALLER, RICHARD, & BARNETT

TO:17278484183
FRA/CI 000 4103

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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:

STATES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

13436 U. S. HIGHWAY 19
HUDSON, FL 34667

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSURANCE SALES AND SERVICE

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):

Timothy D. Grossman
13436 U. S. Highway 19
Hudson, FL 34667

President, Secretary, Treasurer, Director

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To: RelayFax via port COM10

From: N/A

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FEB-7-2008 03:06P FROM:STOCKWELL KNIGHT REA
FED-07-CU001(NU) 12:00 WALLER, RILEY, & DUNNELL

TO:17278484183
(FNA/IC) 000 0103

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ARTICLE VI REGISTERED AGENT

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

Timothy D. Grossman
13436 U. S. Highway 19
Hudson, FL 34667

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Timothy D. Grossman
13436 U. S. Highway 19
Hudson, FL 34667

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



Signature/Registered Agent



Signature/Incorporator

Date

Date

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