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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

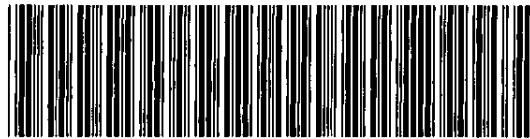
PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 11, 2008

LAWRENCE L. BROWNING
P. O. BOX 61123
FT. MYERS, FL 33906

SUBJECT: THE BROWNING AGENCY INC.
Ref. Number: W08000007149

We have received your document for THE BROWNING AGENCY INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham
Regulatory Specialist II
New Filing Section

Letter Number: 908A00008825

COVER LETTER

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

SUBJECT: THE BROWNING AGENCY INC.
(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: Lawrence L Browning

Name (Printed or typed)

12480 BRANTLEY Commons G #116

PO Box 11123 JB

Address

Fair Myon FL 33907 33907

City, State & Zip

289 278-1700

Daytime Telephone number

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:

The Browning Agency Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business mailing address is:

*Po Box 61123 12480 Brantley Common Ct. #116
Ft. Myers Fl 33907*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSURANCE AGENCY

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*LAWRENCE L. BROWNING, Pres
Po Box 61123
Ft Myers Fl 33906*

*L. Lucas Browning, V.P
Po Box 61123
Ft Myers Fl 33906*

ARTICLE VI REGISTERED AGENT

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

*LAWRENCE L. BROWNING
12480 BRANTLEY COMMONS CT #116
FT MYERS FL 33907*

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

*LAWRENCE L. BROWNING
12480 BRANTLEY COMMONS CT #116
FT MYERS FL 33907*

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

LJ

Signature/Registered Agent

LJ

Signature/Incorporator

2/7/08

Date

2/7/08

Date