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COVER LETTER

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

,			
SUBJECT:) EABOARD FNSURA, (PROPOSED CORPORA	NCE SERVICES.	Inc.
	(PROPOSED CORPORA	ΓΕ NAME – <u>MUST INCL</u> I	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	Certified Copy & Certificate of
		ADDITIONAL CO	Status PY REQUIRED
FROM:	SEABOARD FNSURA,	NCE SERVICES F	tre.
	978 BAY.	DRIVE Address	·····
	KEY WEST F	Z 33040 State & Zip	
(35) 879-1965			

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

Daytime Telephone number

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:

SEABOARD FUSURANCE SERVICES FAC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

97 B BAY DRIVE KEY WEST, FL 33040

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSURANCE SALES

ARTICLE IV SHARES

The number of shares of stock is:

INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V

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

GREG BAUMANN - PRESIDENT

97B BAY DRIVE KEY WEST, FL 33040

<u>ARTICLE VI REGISTERED AGENT</u>	
The name and Florida street address (P.O. Box NO	T acceptable) of the registered agent is:
GREG BAUMANN 97B BAY DRIVE	
97B BAY DRIVE	
KEY WEST, FL 33040	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
GREG BAUMANN 97 BAY DRIVE KEYWEST FL 33040	
97 BAY DRIVE	
KEYWAST FL 33040	
************	************
Having been named as registered agent to accept service of pr certificate, I am familiar with and accept the appointment as re	rocess for the above stated corporation at the place designated in thi gistered agent and agree to act in this capacity
Ω_{Λ}	
Duac	2/21/08 Date
Signature/Registered Agent	Date
Co paus	2/21/08
Signature/Incorporator	Date