

PO9 000043449

(Requestor's Name)

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(City/State/Zip/Phone #)

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MAIL

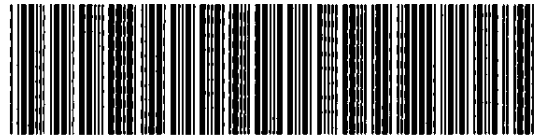
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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05/14/09--01014--015 **78.75

RECEIVED
09 MAY 14 PM 1:31
THE OFFICE OF STATE
TREASURER, FLORIDA

McKnight MAY 18 2009

LAW OFFICES
CHARLOTTE J. BURRIE
2125 E. ATLANTIC BOULEVARD
POMPANO BEACH, FLORIDA 33062-5283
TELEPHONE (954) 943-5210
FAX (954) 781-8855
E-MAIL CBURRIEATTY@AOL.COM

May 11th, 2009

Corporate Records Bureau
Divisions of Corporations - Department of State
P. O. Box 6327
Tallahassee, FL 32301

RE: Articles of Incorporation
Safety Insurance Services, Inc.

Dear Sir:

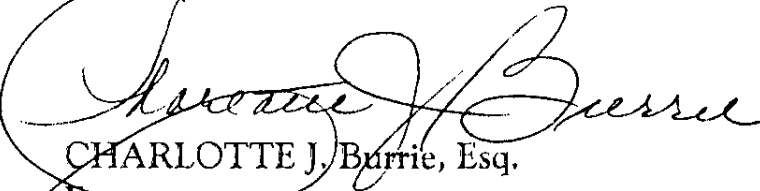
Enclosed please find the original Articles of the above proposed corporation together with my check #5028 in the amount of \$78.75 to cover the following:

Filing Fees	\$ 35.00
Registered Agent Designation	\$ 35.00
Certified Copy	\$ 8.75
TOTAL	\$ 78.75

I am also enclosing a stamped self addressed envelope for return of notification of the filing.

Thank you for your assistance in this matter.

Sincerely,


CHARLOTTE J. Burrie, Esq.
Encs.

ARTICLES OF INCORPORATION
OF
SAFETY INSURANCE SERVICES, INC.

FILED
09 MAY 14 PM 1:31
CLERK OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation

ARTICLE I NAME

The name of the corporation shall be:

SAFETY INSURANCE SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3100 N. Course Lane #601, Pompano Beach, FL 33069

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

MARK ROCHEFORD 3100 N. Course Lane #601, Pompano Beach, FL 33069

ARTICLE V INCORPORATOR(S)

The name and street address of the incorporator to these Articles of Incorporation is:

MARK ROCHEFORD 3100 N. Course Lane #601, Pompano Beach, FL 33069

The undersigned has executed these Articles of Incorporation this 11TH day of May, 2009.


MARK ROCHEFORD

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: SAFETY INSURANCE SERVICES, INC.

2. The name and address of the registered agent and office is:

MARK ROCHEFORD
3100 N. Course Lane #601
Pompano Beach, FL 33069



MARK ROCHEFORD,
President & Sole Incorporator
3100 N. Course Lane #601
Pompano Beach, FL 33069

May 11TH 2009

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.



MARK ROCHEFORD
May 11TH 2009

09 MAY 14 PM 1:31
CLERK OF STATE
TALLAHASSEE, FLORIDA