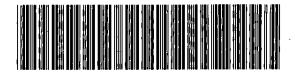
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| (Requestor's Name)                      |
| (Address)                               |
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| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
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| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer  |
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Office Use Only



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## LAZARUS

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### **CORPORATE FILING SERVICE**

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165 (305) 552-5973

|                                       |   | ·                    |                   |
|---------------------------------------|---|----------------------|-------------------|
|                                       |   | fice Use Only        | •                 |
| CORPORATION NAME(S) & DOCUM           | ENT NUMBER(S), (if kno                  | own):                |                   |
| 1 ASHLEY INSUR                        | LANCE AGE                               | NCY, (               | DORP.             |
| (Corporation Name)                    | (Document #)                            | 1                    | 1 .               |
| 2.                                    |   |                      |                   |
| (Corporation Name)                    | (Document #)                            |                      |                   |
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| (Corporation Name)                    | (Document #)                            |                      | ·                 |
| 4.                                    |   |                      |                   |
| (Corporation Name)                    | (Document #)                            |                      | ,                 |
| Walk in Pick up time                  | 1.06                                    | Certified Copy       |                   |
| ☐ Mail out ☐ Will wait                | Photocopy                               | Certificate of State | (1)               |
| NEW FILINGS                           | A NATURALINA ATPRIUTO                   |                      | OEC CRET          |
|                                       | AMENDMENTS                              |                      | - 35.E            |
| Profit Not for Profit                 | Amendment Resignation of R.A.,          | Officer/Director     | OF STATE REPORTED |
| Limited Liability Domestication       | Change of Registere Dissolution/Withdra | d Agent              | # <b>54</b>       |
| Other                                 | Merger                                  | wai                  | r.                |
| OTHER FILINGS                         | REGISTRATION/QUA                        | LIFICATION           |                   |
| Annual Report                         | ☐ Foreign                               |                      |                   |
| Fictitious Name                       | Limited Partnership                     |                      |                   |
| ·                                     | Reinstatement Trademark                 |                      |                   |
|                                       | Other                                   |                      |                   |
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| •                                     |   | EXAMING SIMULE       | ,                 |

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WE THE UNDERSIGNED, hereby associate ourselves together for the purpose of Becoming a Corporation under the laws of the State of Florida, providing for the Formation liability rights, privileges and immunities of the Corporations for profit.

#### ARTICLE I, NAME

The name of this Corporation shall be:

#### ASHLEY INSURANCE AGENCY, CORP.

#### ARTICLE II, NATURE OF BUSINESS

This Corporation may engage in any activity or business permitted under the laws

Of the United States and of the State of Florida

That the present main business of the Corporation is as follow:

#### **INSURANCE AGENCY**

#### ARTICLE III, CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any time is One hundred (100) Shares of common stock, of \$ 10.00

#### Ten dollar par value ARTICLE IV, INITIAL CAPITAL

The amount of capital with which this Corporation will begin business will be No less than \$ 500.00 (five hundred) Dollars.

ARTICLE V, TERM OF EXISTENCE

The Corporation is to have perpetual existence.

#### 2 ARTICLE VI. ADDRESS

The initial street address in this State of the principal office of the Corporation shall be

The Board of Director may from time to time move the principal office to any other

# 375 WEST 29<sup>TH</sup> STREET HIALEAH, FL. 33012

#### ARTICLE VII, DIRECTORS

This Corporation shall have ONE (1) Directors initially the number of directors may be Increase or decreased from time to time in such manner as may be prescribed by the By-Laws, but shall never be less than one (1).

The Corporation shall indemnify and hold harmless each person who shall save at any

Time hereafter as a director or officer of the Corporation, and any person who serves at
the request of this Corporation, as a Director or Officer of any other Corporation, from
and against any and all claims and liabilities to which such person shall become subject
by reason of this having heretofore of hereafter being a director or officer of the -----corporation or by reason of any action alleged to have been heretofore or hereafter taken or
omitted by him as such director or officer, and shall reimburse each such person for all
Legal and other expenses reasonably incurred by him in connection with any claim or
Liability provided that no person shall be indemnified against, or reimbursed for, any
Expenses incurred in connection with any claim or liability as to which it shall be
Adjudged that such officer or director is liable for negligence or willful misconduct
In the performance of his duties

The right accruing to any person under the foregoing provisions shall not exclude any
Other rights to which he maybe lawfully entitled nor shall anything herein Contained
Restrict the right of the Corporation to indemnify reimburse such person in any
Proper case even though not specifically herein provided for.

No contract or other transaction between this Corporation and any other Corporation and no act of this Corporation shall in any way be affected or invalidated by the fact that any of the directors or the Corporation are peculiarity or otherwise interested in, pr are directors or officers of, such other Corporation; any director individually, or any firm of which any director may be a member, may be party to, or may be peculiarity or otherwise interested in, any contract or transaction of the Corporation, provided that the fact that he or such firm so interested shall be disclosed or shall have been known to the Board of Directors or such members thereof as shall be present at any meeting of the board at which action upon any such contract or transaction shall be taken; and any Director of the Corporation who is also a director or officer of such other Corporation or is so interested may be counted in determining the existence of a quorum at any meeting of the Board of Directors of the Corporation which shall authorize any such contract or transaction, and may vote thereat to authorized any such contract or transaction, with the like force and effect as if he were not such director or officer of such Corporation or not so interested

#### ARTICLE VIII, INITIAL DIRECTORS

The Name and address of the first Board of Directors and the officers, who, subject to provisions of these Articles of Incorporation, By-Laws of this Corporation and the Corporation laws of the State of Florida, shall hold office the first year of the Corporation's existence, or until their successors are elected and have qualified, are as Follows

Name

Title

Address

FERNANDEZ EMILIO V.

PRESIDENT/D

80 SW. 8<sup>TH</sup> ST, SUIT 2550 MIAMI FL. 33130

#### ARTICLE IX, INCORPORATORS

The names address of each incorporator of this articles of Incorporation are

As follows:

NAME FERNANDEZ EMILIO V.

Address 80 SW 8<sup>TH</sup> ST, SUITE 2550 MIAMI, FL 33130

#### ARTICLE X, OFFICERS

The officers of this Corporation shall be a President, one or more Vice-President

Secretary and Treasurer, and such other officers, agents and factors as may be deemed

Necessary all officers, agents and factors shall be chosen in such manner hold their

Officer for such terms, and have such powers and duties as may be prescribed by the

By-Laws or determined by the Board of Directors.

#### ARTICLE XI, AMENDMENT

This Corporation reserves the right to amend, alter, change or repeal any provision

Contained in these Articles of Incorporations in the manner now or hereafter prescribed

By Statute, and all rights conferred to stockholders herein granted subject to this -----
Reservation

## ARTICLE XII, REGISTERED AGENT AND REGISTERED ADDRESS

EMILIO V. FERNANDEZ 80 SW 8<sup>TH</sup> ST. SUITE 2550 MIAMI, FL 33130

| IN WITNESS WHEREOF, th          | ne undersigned   | i, as subs  | cribing incorporators, have     |
|---------------------------------|------------------|-------------|---------------------------------|
| Here unto set our hands and     | Seals this       | 10          | _ day of December 200 g.        |
| For the purpose of forming th   | is Corporation   | n under th  | ne laws of the State of Florida |
| and hereby make and file, in t  | the office of th | ne Secreta  | ary of the State of Florida,    |
| these Articles of Incorporation | n, and certify   | that the fa | acts herein stated are truth    |

EMILIO V. FERNANDEZ

# ACCEPTANCE OF DESIGNATION OF RESIDENT AGENT

The undersigned, named as Resident Agent in the XII Articles of Incorporation of:

ASHLEY INSURANCE AGENCY, CORP. does hereby accept the

Designation RESIDENT AGENT and agrees to perform those duties until and unless

Removed by the of Board Directors of said Corporation.

Dated at Miami, Dade County, Florida, this 10 Day of Dec. 2009

EMILIO V. FERNANDEZ

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COUNTY OF DADE

Before me personally appeared:

EMILIO V. FERNANDEZ.....

Known to me be the person described in and who executed the foregoing

Articles of Incorporation and acknowledged before me that the executed same freely and voluntarily for the purpose of herein stated,------

WITNESS my hand and official seal at Miami, Dade County, and State of Florida.

This 10 day of DECear der 2009

NOTARY PUBLIC Notary Public, State of Florida My commission # DD864575

Expires: 04/07/13

SANTOS A. ALBA
MY COMMISSION # DD864575
EXPIRES: April 07, 2013
MD2 apr F, Notar Discount Assec Co