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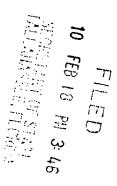
(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Cartification of Charles				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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COVER LETTER

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

SUBJECT: Power	house Insurance Group, In	c. Ate name – must incl	This cherici
	(FROTOSED CORFOR	ATE NAME - MOST INCL	UDE SUFFIA)
Enclosed are an orig	rinal and one (1) copy of the art	ticles of incorporation and	l a check for:
□ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM: Ed	oris Cromartie, Jr		, ·-
		e (Printed or typed)	
836	2 Pines Boulevard, Ste-202		
	•	Address	
Per	mbroke Pines, Florida 3302	4 State & Zip	
	City,	State of Lip	
786	-486-2301		
	Daytime T	elephone number	
ecro	ma61@yahoo.com	•	
		d for future annual report r	otification)

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)

<u>ARTICLE I NAME</u>

The name of the corporation shall be: Powerhouse Insurance Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 19501 N.W. 37th Court, Miami, Florida 33055 Mailing Address: 8362 Pines Boulevard, Ste-202, Pembroke Pines, Florida 33024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in all phases of the insurance business. To act as an insurance agency througout the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100@ \$1.00/per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Edoris Cromartie, Jr, P/S/T

ARTICLE VI REGISTERED AGENT

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

Aleloise H. Cromartie- 8362 Pines Boulevard, Ste-202, Pembroke Pines ,Florida 33024

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Edoris Cromartie, Jr

8362 Pines Boulevard, Ste-202 Pembroke Pines, Florida 33024

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

01/29/2010

Date

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01/29/2010

Date