

9/23/2010

Division of Corporations

Florida Department of State
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To:

Division of Corporations
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Account Name : HUBCO
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION
Palm Beach Insurance Associates, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
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TALLAHASSEE, FLORIDA

10 SEP 23 PM 3:14

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Palm Beach Insurance Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Palm Beach Insurance Associates, Inc.

721 US Highway 1, Suite 207-208

North Palm Beach, FL 33408

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ARTICLE III SHARES

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

200 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Michael Kotecki

721 US Highway 1, Suite 207-208

North Palm Beach, FL 33408

Prepared By:

Bruce B. Hubbard

77 East John St.

Hicksville, New York 11801

1-516-885-3940

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ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

**Michael Kotecki - Secretary/Director
117 Lehané Terrace #202
North Palm Beach, FL 33408**

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

**Michael Kotecki
117 Lehané Terrace #202
North Palm Beach, FL 33408**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

21st day of September 2010



Michael Kotecki - Signature

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**CERTIFICATE OF DESIGNATION OF
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 THE DESIGNATING THE
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Palm Beach Insurance Associates, Inc.**

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

Michael Kotecki

Name

721 US Highway 1, Suite 207-208

(P.O. Box or Mail Drop Box NOT Acceptable)

North Palm Beach, FL 33408

(City / State / Zip)

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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

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TALLAHASSEE, FLORIDA

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AND
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Michael Kotecki
SIGNATURE

September 21, 2010

(Date)

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