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Fax Number : (850) 617-6381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : 120000000257

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FLORIDA PROFIT/NON PROFIT CORPORATION Patrick Stewart Insurance Group, Inc.

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ARTICLES OF INCORPORATION

OF

Patrick Stewart Insurance Group, Inc.

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 is Patrick Stewart Insurance Group, Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 100 Hall Street, LaBelle, Florida, 33935

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is five hundred (500) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Ralph Elver, 301 W. SR 80, Suite 201, LaBelle, Florida, 33935

ARTICLE V: OFFICERS & DIRECTORS

The name and address of the initial Officer and Director of the corporation is:

Patrick Ryan Stewart, President/Secretary./Director, 909 Arthur Street, Immokalee, Florida,
34142

ARTICLE VI: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL. 32301.

The undersigned has executed these Articles of Incorporation this 10th day of November 2010.

"Your Capital Connection, Inc. by, Seth Neeley, Client Representative"



CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

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

- 1. The name of the corporation is: Patrick Stewart Insurance Group, Inc.
- 2. The name and address of the registered agent and office is:

Ralph Elver 301 W. SR 80, Suite 201 LaBelle Florida

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 HERBY 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.

Ralph Elver

33935

SEGRETARY OF STATE