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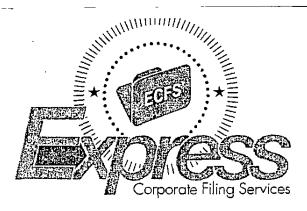
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REGISTRATION/ QUALIFICATION
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Limited Partnership
Reinstatement
Trademark
Other

Examiner's Initials

OTHER FILNGS

Annual Report
Fictitious Name
Name Reservation

## ARTICLES OF INCORPORATION OF ALL OPTIONS INSURANCE INC

FILED.

12 MAR -9 AM 7: 24

SECNETARY OF STATE
TALLAMASSEE FLOSION

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:

#### **ALL OPTIONS INSURANCE INC**

Article II - Principal Office

The principal place of business shall be:

22167 SW 98 COURT MIAMI, FL 33190

Article III - Shares

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

ONE THOUSAND (1,000)

Article IV - Purpose

To carry on and engage in any lawful business.

Article V - Initial Registered Agent and Street Address

The name and address of the initial registered agent is:

FANNY U. REGALADO 22167 SW 98 COURT MIAMI, FL 33190

#### Article VI - Incorporator(s)

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

Name	Title	Address	Shares
FANNY U.	PRESIDENT	22167 SW 98 COURT	100%
REGALADO	REGIRTERD AGENT	MIAMI, FL 33190	
CARMEN B.	VICE PRESIDENT	22167 SW 98 COURT	0%
REGALADO	SECRETARY	MIAMI, FL 33190	

#### Article VII Directors

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

The same as Incorporators.

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

7 day of March 2012

WITNESS:

U. REGALAD

aimer B. Regalado

ARMEN B. REGALADO

### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE2 MAR -9 AM 7: 24

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Status, 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: **ALL OPTIONS INSURANCE INC** 

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

FANNY U. REGALADO 22167 SW 98 COURT MIAMI, FL 33190

During been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

ANNY U. REGALADO

(Seal)