

**Electronic Articles of Incorporation
For**

P14000059956
FILED
July 15, 2014
Sec. Of State
tscott

INSURE FLORIDA BENEFIT PROFESSIONALS, INC

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

INSURE FLORIDA BENEFIT PROFESSIONALS, INC

Article II

The principal place of business address:

335 SW INWOOD CT
LAKE CITY, FL. 32025

The mailing address of the corporation is:

335 SW INWOOD CT
LAKE CITY, FL. 32025

Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

1

Article V

The name and Florida street address of the registered agent is:

ORESTE VILLAR
335 SW INWOOD CT
LAKE CITY, FL. 32025

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: ORESTE VILLAR

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Article VI

The name and address of the incorporator is:

ORESTE VILLAR
335 SW INWOOD CT

LAKE CITY, FL 32025

Electronic Signature of Incorporator: ORESTE VILLAR

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
ORESTE VILLAR
335 SW INWOOD CT
LAKE CITY, FL. 32025

Article VIII

The effective date for this corporation shall be:

07/14/2014