

**Electronic Articles of Incorporation  
For**

P16000079945  
FILED  
September 29, 2016  
Sec. Of State  
nculligan

INSURANCE HEALTH OPTIONS 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:

INSURANCE HEALTH OPTIONS INC.

**Article II**

The principal place of business address:

1900 NORTH UNIVERSITY DRIVE  
210  
PEMBROKE PINES, FL. 33024

The mailing address of the corporation is:

1900 NORTH UNIVERSITY DRIVE  
210  
PEMBROKE PINES, FL. 33024

**Article III**

The purpose for which this corporation is organized is:

THIS IS AN INSURANCE PHONE SALES CENTER.

**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:

ANN V BERNARD FILS  
1900 N. UNIVERSITY DR.  
210  
PEMBROKE PINES, FL. 33024

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

Registered Agent Signature: ANN V FILS

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## **Article VI**

The name and address of the incorporator is:

ANN V. BERNARD FILS  
1900 NORTH UNIVERSITY DRIVE  
210  
PEMBROKE PINES

Electronic Signature of Incorporator: ANN FILS

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  
ANN V BERNARD-FILS  
1900 NORTH UNIVERSITY DRIVE SUITE 210  
PEMBROKE PINES, FL. 33024

## **Article VIII**

The effective date for this corporation shall be:

09/27/2016