

Electronic Articles of Incorporation For

**P16000093617
FILED
November 22, 2016
Sec. Of State
vherring**

ALL FLORIDIAN INSURANCE, 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:

ALL FLORIDIAN INSURANCE, INC.

Article II

The principal place of business address:

1703 N MAIN ST
SUITE A
KISSIMMEE, FL. 34744

The mailing address of the corporation is:

1703 N MAIN ST
SUITE A
KISSIMMEE, FL. UN 34744

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:

FLORIDA INSURANCE OFFICE INC.
1703 N MAIN ST
SUITE A
KISSIMMEE, FL. 34744

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

Registered Agent Signature: MONICA P VALLE

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Article VI

The name and address of the incorporator is:

MONICA VALLE
1703 N MAIN ST
SUITE A
KISSIMMEE FL 34744

Electronic Signature of Incorporator: MONICA P VALLE

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
FLORIDA INSURANCE OFFICE INC.
1703 N MAIN ST, SUITE A
KISSIMMEE, FL. 34744

Article VIII

The effective date for this corporation shall be:

01/01/2017