

**Electronic Articles of Incorporation  
For**

P17000020760  
FILED  
March 03, 2017  
Sec. Of State  
kbrumbley

MY FAMILY INSURANCE CORP

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:

MY FAMILY INSURANCE CORP

**Article II**

The principal place of business address:

711 BEACOM BLVD  
#2  
MIAMI, FL. 33135

The mailing address of the corporation is:

711 BEACOM BLVD  
#2  
MIAMI, FL. 33135

**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:

1000

**Article V**

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

LUIS O HERNANDEZ HERNANDEZ SR  
711 BEACOM BLVD  
#2  
MIAMI, FL. 33135

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

Registered Agent Signature: LUIS O HERNANDEZ HERNANDEZ

## **Article VI**

The name and address of the incorporator is:

LUIS O HERNANDEZ HERNANDEZ  
711 BEACOM BLVD  
#2  
MIAMI, FL 33135

Electronic Signature of Incorporator: LUIS O HERNANDEZ HERNANDEZ

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  
LUIS O HERNANDEZ HERNANDEZ SR  
711 BEACOM BLVD #2  
MIAMI, FL. 33135

Title: P  
MARIELA VALDIVIA LOPEZ MS  
711 BEACOM BLVD #2  
MIAMI, FL. 33135

## **Article VIII**

The effective date for this corporation shall be:

03/03/2017