

**Electronic Articles of Incorporation
For**

P19000034859
FILED
April 18, 2019
Sec. Of State
tburch

OPTIMUM INSURANCE SERVICES, 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:

OPTIMUM INSURANCE SERVICES, INC.

Article II

The principal place of business address:

16090 SW 304 TER
HOMESTEAD, FL. FL 33033

The mailing address of the corporation is:

16090 SW 304 TER
HOMESTEAD, FL. FL 33033

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:

100

Article V

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

ORLANDO A GALVAN
16090 SW 304 TER
HOMESTEAD, FL. 33033

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

Registered Agent Signature: ORLANDO A. GALVAN

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Article VI

The name and address of the incorporator is:

ORLANDO A. GALVAN
16090 SW 304 TER

HOMESTEAD, FL 33033

Electronic Signature of Incorporator: ORLANDO A. GALVAN

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
ORLANDO A GALVAN
16090 SW 304 TER
HOMESTEAD, FL. 33033 US