

11-2-94 **P95000004483**

Charter Number Only

Blumenfeld, M.D.
Requestor's Name
1428 McKinley St.
Address
Hollywood Fl 33020
City State ZIP Phone
H-7301A

DATE
TIME
ONLY

300001336433
-11/22/94--01054--031
****122.50 ****122.50

CORPORATION(S) NAME

CITADEL INSURANCE AGENCY, INC.

FILED
95 JAN 19 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EMPIRE Toll Free: 1-800-432-3028

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Foreign | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Change of Registered Agent |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Certificate Under Seal |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| | | <input type="checkbox"/> Mail Out |

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

CERTIFIED COPY

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12284
H. SIMS NOV 22 1994



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

November 22, 1994

EMPIRE

MIAMI, FL

SUBJECT: CITADEL INSURANCE AGENCY, INC.
Ref. Number: W94000025117

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JUN 18 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for CITADEL INSURANCE AGENCY, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

In reviewing our records, we note there is a(n) CITADEL INSURANCE AGENCY, INC., Document number K64896, which was involuntarily or administratively dissolved.

Because of the similarities between the dissolved corporation and the one you are now seeking to file with us, and because it is our duty to assure that all fees due this office in accordance with section 607.0130(2)(c), Florida Statutes, are collected, we are returning the articles of incorporation unfilled and must request you reinstate the dissolved corporation by completing the enclosed reinstatement application and submitting it with the appropriate fees.

The fees to reinstate the corporation are as follows: \$175 reinstatement fee, \$61.25 filing fee per year for the years 11/09/1990 through the current year, \$138.75 supplemental fee for the years 1992 forward. The total fee to file the reinstatement is \$897.50, therefore, there is a balance of \$775.00 due. Add an additional \$8.75 for each certificate of status requested.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Hope Sims
Corporate Specialist

Letter Number: 794A00050586

CERTIFICATE OF INCORPORATION
OF
HALBIN INSURANCE AGENCY, INC.

FILED
JUN 18 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BY THESE ARTICLES OF INCORPORATION, the incorporator forms a corporation for profit under Florida law.

ARTICLE I: NAME & MAILING ADDRESS

The name and mailing address of this corporation is Halbin Insurance Agency, Inc., 54 N.E. 54 Street, Miami, FL 33137.

ARTICLE II: TERM OF EXISTENCE

This corporation shall have perpetual existence unless dissolved by action of law.

ARTICLE III: PURPOSE

The purpose of this corporation is to transact any or all lawful business for which corporations may be incorporated under Florida law.

ARTICLE IV: CAPITAL STOCK

This corporation is authorized to issue one hundred shares of common stock at the par value of one dollar per share.

ARTICLE V: REGISTERED AGENT

The name and address of the initial registered agent and office of this corporation is Henri Hall, M.D., 54 N.E. 54 Street, Miami, FL 33137.

ARTICLE VI: DIRECTORS

The corporation shall have two Directors initially. The number of Directors may be increased or decreased from time to time as the

stockholders desire in accordance with the by-laws hereof.

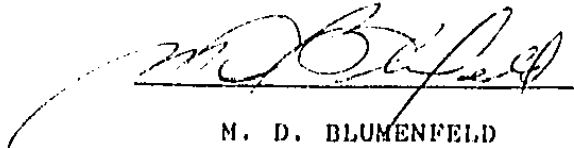
ARTICLE VII: INCORPORATOR

The name and address of the incorporator signing these articles is
M. D. Blumenfeld, 1928 McKinley Street, Hollywood, FL 33020.

ARTICLE VIII: AMENDMENT

These Articles of Incorporation may be amended in the manner
provided by law. Every amendment shall be approved by the Board of
Directors, proposed by them to the stockholders, and approved at a
stockholders meeting by a majority of the stockholders.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 17
day of November, 1994.

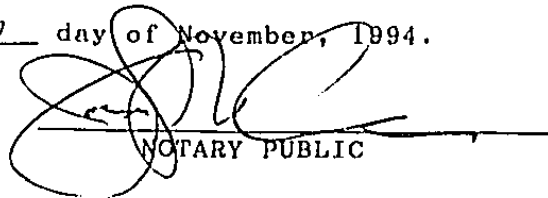

M. D. BLUMENFELD

STATE OF FLORIDA)

COUNTY OF DADE)

I hereby certify that on this day, before me, a Notary Public,
duly authorized in the State and County named above to take
acknowledgements, personally appeared M. D. BLUMENFELD, to me
personally known to be the person described as incorporator of and
who executed the foregoing Articles of Incorporation, and she
acknowledged before me that she subscribed to these Articles of
Incorporation.

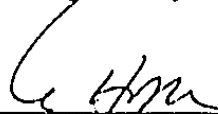
WITNESS MY hand and seal this 17 day of November, 1994.


NOTARY PUBLIC

My commission expires:

NOTARY PUBLIC, STATE OF FLORIDA.
MY COMMISSION EXPIRES: Oct. 24, 1995.
REGISTERED NOTARY PUBLIC UNDERWRITERS.

Having been named as Registered Agent for the above stated corporation, at the place designated in the Articles of Incorporation, I hereby agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.



Date

11/18/94

HENRI HALL, M. D.

FILED
95 JAN 18 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA