

CORPORATION INFORMATION
SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32314
904-222-9171
904-222-0191 FAX

800-342-8086

CSC networks

MAIL TO:
P.O. Box 5820
TALLAHASSEE, FL 32314

P95000008035

ACCOUNT NO. : 072100000032

REFERENCE : 533053 145216A

AUTHORIZATION : *Patricia Pizots*

COST LIMIT : 9 122.50

ORDER DATE : January 31, 1995

ORDER TIME : 10:13 AM

ORDER NO. : 533053

4000001398824

CUSTOMER NO: 145216A

CUSTOMER: Jeffrey M. Goodis, Esq
THE THOMPSON LAW GROUP

Suite 301
600 First Avenue North
Saint Petersburg, FL 33731

DOMESTIC FILING

P95000008035

NAME: ILLER WALL & SHONTER INSURANCE,
INC.

XX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Andrea Hamilton

EXAMINER'S INITIALS:

DM
1-31-95
02/A

RECEIVED
95 JAN 31 AM 11:38
DIVISION OF CORPORATION
FILED
95 JAN 31 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
ILER WALL & SHONTER INSURANCE, INC.

FILED
95 JAN 31 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporators for the purpose of forming a corporation under the Florida Business Corporation Act (*Fla. Stat. Chapter 607*), hereby adopts the following as their Articles of Incorporation.

ARTICLE ONE - NAME, PRINCIPAL OFFICE & MAILING ADDRESS

The name of the corporation shall be; Iler Wall & Shonter Insurance, Inc. The address of the principal office shall be 800 49th Street North, St. Petersburg, Florida 33709 and the mailing address of this corporation is P. O. Box 14448 St. Petersburg, Fl 33733.

ARTICLE TWO - PURPOSE

This corporation is organized for the purpose of engaging in every phase and aspect of the sale and brokerage of insurance and transacting all lawful business associated therewith.

ARTICLE THREE - SHARES

The corporation is authorized to have ninety nine (99) shares of stock outstanding at any one time.

ARTICLE FOUR - INITIAL REGISTERED AGENT & STREET ADDRESS

The name of the initial registered agent is CLAIRE SHONTER whose address for these purposes is 800 49th Street North, St. Petersburg, Florida 33709, the principal office of the corporation.

ARTICLE FIVE - INCORPORATORS

The names and street addresses of the incorporators to these Articles of Incorporation are:

RICHARD LEE ILER, President, Director and Incorporator, 800 49th Street North, St. Petersburg, Florida 33709, the principal office of the corporation.

RICHARD J. SHONTER^{JR.}, Vice President, Director and Incorporator, 800 49th Street North, St. Petersburg, Florida 33709, the principal office of the corporation.

JAMES KIPPS WALL, Vice President, Treasurer, Director and Incorporator, 800 49th Street North, St. Petersburg, Florida 33709, the principal office of the corporation.

CLAIRE SHONTER, Vice President, Secretary, Director and Incorporator, 800 49th Street

North, St. Petersburg, Florida 33709, the principal office of the corporation.

The undersigned incorporators have executed these Articles of Incorporation this the 26th day of January, 1995.

Richard Lee Iler

RICHARD LEE ILER, President, Director and Incorporator

Richard J. Shonter

RICHARD J. SHONTER, Vice President, Director and Incorporator

James Kipps Wall Jr

JAMES KIPPS WALL, Vice President, Treasurer, Director and Incorporator

Claire Shonter

CLAIRE SHONTER, Vice President, Secretary, Director and Incorporator

**CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT/REGISTERED OFFICE**

FILED
95 JAN 31 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, *Florida Statutes* THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of corporation is Her Wall & Shonter Insurance, Inc.
2. The name and address of the registered agent and office is:

CLAIRE SHONTER, Vice President, Secretary,
Director and Incorporator, 800 49th Street North, St.
Petersburg, Florida 33709, the principal office of the
corporation.

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to proper and complete performance of my duties and I am familiar with and accept the obligations of my position as registered agent.



CLAIRE SHONTER, Registered Agent.

P95000008035
ER & WALL INSURANCE, INC.

**P. O. BOX 14448
ST. PETERSBURG, FL 33733-4448
(813) 327-7070**

SPECIAL ANNOUNCEMENT!

We have formally merged with
Shonter & Shonter Insurance, Inc.

Our new name is:

**ILER WALL & SHONTER
INSURANCE, INC.**

Our new street address is:
**800 - 49TH STREET NORTH
ST. PETERSBURG, FL 33710**

Effective May 5, 1995

Mailing Address and Phone Number
will remain the same.

Rick Iler and Kipp Wall

mpc
5-2-95

P95000008035

Martin Errol Rice, P.A.
(Requestor's Name)
P.O. Box 205
(Address)
St. Petersburg FL 33731
(City, State, Zip) (Phone #)

800001713078
-02/07/96--01053--001
****297.50 *****87.50

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment NC
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 FEB -7 AM 8:49

SH FEB 13 1996

Examiner's Initials

ILER, WALL & SHONTER INSURANCE, INC.

ARTICLES OF AMENDMENT

1. The following provisions of the Articles of Incorporation of ILER, WALL & SHONTER INSURANCE, INC., a Florida corporation, filed in Tallahassee on the 31st day of January, 1995, be and they hereby are amended in the following particulars:

Article First, be and it hereby is amended to read as follows:

"The name of this corporation is IWS Insurance, Inc."

2. The foregoing amendments were unanimously adopted by the Stockholders and Directors of the corporation on the 30th day of December, 1995.

IN WITNESS WHEREOF, the undersigned President and Secretary of this corporation have executed these Articles of Amendment this 30th day of December, 1995.

ILER, WALL & SHONTER
INSURANCE, INC., a Florida
corporation

By Richard Lee Iler
President

James Kipp Weil
Secretary

STATE OF FLORIDA
COUNTY OF PINELLAS

BEFORE ME, the undersigned authority, personally appeared Richard Lee Iler, President of Iler, Wall & Shonter Insurance, Inc., a Florida corporation, personally known to me or who produced the Identification, who executed the foregoing Articles of Amendment and he acknowledged before me that he executed such instrument for the purposes therein stated.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 10th day of January, 1995.

Margaret B. Bentley
Notary Public, State of Florida
My Commission Expires:



MARGARET B. BENTLEY
MY COMMISSION # CC475527 EXPIRES:
June 22, 1999
BONDED THRU TROY FAIR INSURANCE, INC.

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 FEB -7 AM 8:49

STATE OF FLORIDA
COUNTY OF PINELLAS

BEFORE ME, the undersigned authority, personally appeared Claire Shonter, Secretary of Iler, Wall & Shonter Insurance, Inc., a Florida corporation, personally known to me, or who produced the identification, who executed the foregoing Articles of Amendment and she acknowledged before me that she executed such instrument for the purposes therein stated.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 10th day of January, 1995 MBB

Margaret B. Bentley
Notary Public, State of Florida
My Commission Expires:

a:ertamend.doc
Corp. Disk #3



MARGARET B. BENTLEY
MY COMMISSION # CC475527 EXPIRES
June 22, 1999
BONDED THRU TROY FAIR INSURANCE, INC.

MARTIN ERROL RICE, P.A.

Attorney At Law

Post Office Box 205

St. Petersburg, Florida 33731

(813) 821-4884

P95000008035

April 22, 1996

Honorable Sandra B. Mortham
Secretary of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32399

400001802694
-05/01/96--01022--007
*****87.50 *****87.50

RE: IWS Insurance, Inc.
Document Number: P95000008035

Dear Ms. Mortham:

Enclosed find Articles of Dissolution, together with
check in the amount of \$87.50 to cover fees for dissolving the
above-referenced corporation.

Very truly yours,



Martin Errol Rice, Esq.

MER/ms

Encl. (Art. of Dissolution, Check)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 APR 29 PM 3:41

valid
MAY 11 1996

ARTICLES OF DISSOLUTION PURSUANT TO SECTION
607.1403 OF THE FLORIDA BUSINESS CORPORATION
ACT OF IWS INSURANCE, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 APR 29 PM 3:41

To: Department of State
Tallahassee, Florida 32314

Date Paid
Filing Fee \$

Pursuant to the provisions of Section 607.1403 of the Florida Business Corporation Act, the undersigned corporation adopts the following articles of dissolution for the purpose of dissolving the corporation.

1. The name of the corporation is IWS Insurance, Inc.
2. The names and respective addresses of the officers of the corporation are as follows:

Richard Lee Iler
President

800 49th Street North
St. Petersburg, FL 33710

James Kipps Wall
Secretary

800 49th Street North
St. Petersburg, FL 33710

3. The names and respective addresses of the directors of the corporation are as follows:

Richard Lee Iler
President

800 49th Street North
St. Petersburg, FL 33710

James Kipps Wall
Secretary

800 49th Street North
St. Petersburg, FL 33710

4. Dissolution was authorized on 12th day of April, 1996.

5. The dissolution was approved by one hundred (100%) percent of the shareholders.

6. Adequate provision has been made for the payment of all of the liabilities and obligations of the corporation.

7. No property or assets remained to be distributed among the shareholders of the corporation after the payment of all debts, obligations and liabilities of the corporation.

8. There are no actions pending against the corporation in any court.

9. The Corporation elected to dissolve by unanimous written consent of its shareholders, and such written consent has been signed by all shareholders of the

corporation or signed in their names by their duly authorized attorneys.

DATED this 12 day of April, 1996.

IWS INSURANCE, INC.

Richard Lee Iler
Richard Lee Iler, President

James Kipps Wall
James Kipps Wall, Secretary

STATE OF FLORIDA
COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 12 day of April, 1996, by Richard Lee Iler, as President of IWS Insurance, Inc., a Florida corporation, on behalf of the corporation. He is personally known to me or has produced personally known as identification and did take an oath.



Lisa J. Gussler
MY COMMISSION # CC538617 EXPIRES
March 24, 2000
BONDED THRU TROY FAIR INSURANCE, INC.

Lisa J. Gussler
NOTARY PUBLIC

My Commission Expires: 3/24/2000

STATE OF FLORIDA
COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 12 day of April, 1996, by James Kipps Wall, as Secretary of IWS Insurance, Inc., a Florida corporation, on behalf of the corporation. He is personally known to me or has produced personally known as identification and did take an oath.



Lisa J. Gussler
MY COMMISSION # CC538617 EXPIRES
March 24, 2000
BONDED THRU TROY FAIR INSURANCE, INC.

Lisa J. Gussler
NOTARY PUBLIC

My Commission Expires: 3/24/2000