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ACCOUNTING & TAXES BY COMPUTER
% FRANK FLEISCHMAN
PO BOX 459
SAN MATEO, FLORIDA 32187
FEBRUARY 11, 1995

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FLORIDA 32314

DEAR SIR,

ENCLOSED IS THE ARTICLES OF INCORPORATION FOR PROFESSIONAL
INSURANCE PERSONNEL, INC. IN DUPLICATE. ALSO A CHECK FOR \$70.00 TO
COVER THE COST OF FILING.

PLEASE SEND ALL CORRESPONDENCE TO:
ACCOUNTING & TAXES BY COMPUTER
% FRANK FLEISCHMAN
PO BOX 459
SAN MATEO, FL 32187

SINCERELY,


FRANK FLEISCHMAN

Dmc
2/17/95

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
PROFESSIONAL INSURANCE PERSONNEL, INC.

WE, THE UNDERSIGNED SUBSCRIBERS TO THESE ARTICLES OF INCORPORATION,
DO HEREBY FORM A CORPORATION UNDER THE LAWS OF THE STATE OF
FLORIDA.

ARTICLE I. NAME

THE NAME OF THIS CORPORATION IS PROFESSIONAL INSURANCE PERSONNEL,
INC.

ARTICLE II. DURATION OF THE CORPORATION

THIS CORPORATION IS TO EXIST PERPETUALLY.

ARTICLE III. NATURE OF BUSINESS

THE GENERAL PURPOSE FOR WHICH THIS CORPORATION IS INITIALLY
ORGANIZED SHALL CONSIST OF THE TRANSACTIONS OF ANY OR ALL LAWFUL
BUSINESS FOR WHICH BUSINESSES MAY BE INCORPORATED UNDER AND
PURSUANT TO THE FLORIDA GENERAL CORPORATION ACT.

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ARTICLE IV. CAPITAL STOCK

THE CORPORATION SHALL BE AUTHORIZED TO ISSUE COMMON STOCK, OF A SINGLE CLASS, OF A TOTAL OF NOT MORE THAN ONE-HUNDRED (100) SHARES, HAVING PAR VALUE OF \$1.00 PER SHARE.

ARTICLE V. ADDRESS OF REGISTERED OFFICE

THE REGISTERED ADDRESS OF THE PRINCIPAL OFFICE OF THIS CORPORATION IN THE STATE OF FLORIDA IS 235 EAST RIVER ROAD, EAST PALATKA, FLORIDA 32131 AND THE NAME OF ITS INITIAL REGISTERED AGENT WITH SUCH ADDRESS IS CYNTHIA KLEID. THE BOARD OF DIRECTORS MAY FROM TIME TO TIME REMOVE THE REGISTERED OFFICE TO ANY OTHER STREET ADDRESS IN FLORIDA, AND DESIGNATE OTHER PERSONS AS ITS REGISTERED AGENTS, PROVIDED THAT THE REGISTERED AGENT SHALL MEET THE REQUIREMENTS OF LAW.

ARTICLE VI. BOARD OF DIRECTORS

THIS CORPORATION SHALL HAVE A BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN ONE (1) PERSONS. THE NUMBER OF DIRECTORS MAY BE INCREASED OR DIMINISHED FROM TIME TO TIME, BUT SHALL NEVER BE LESS THAN ONE (1). NOTHING IN THESE ARTICLES, HOWEVER, SHALL BE CONSTRUCTED TO PROHIBIT THE BOARD FROM DESIGNATING ONE OF ITS MEMBERS AS AN EXECUTIVE COMMITTEE, WITH FULL POWERS TO ACT FOR AND IN BEHALF OF THE DIRECTORS FOR SUCH PERIOD AND UPON SUCH TERMS AS THE BYLAWS MAY PROVIDE.

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THE NAMES AND ADDRESSES OF EACH PERSON WHO IS TO SERVE AS A MEMBER OF THE BOARD OF DIRECTORS IS AS FOLLOWS:

CYNTHIA KLEID
PO BOX 989
EAST PALATKA, FLORIDA 32131

ARTICLE VII. INCORPORATORS

THE PERSON WHO HAS SIGNED AND DELIVERED OR REQUESTED TO BE DELIVERED THESE ARTICLES OF INCORPORATION TO THE DEPARTMENT OF STATE, STATE OF FLORIDA, IS THE INCORPORATOR OF THIS CORPORATION, WHOSE NAMES AND ADDRESSES ARE AS FOLLOWS:

CYNTHIA KLEID
PO BOX 989
EAST PALAKTA, FLORIDA 32131

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ARTICLE VIII. DESIGNATION OF REGISTERED AGENT

THERE IS APPENDED TO THESE ARTICLES A CERTIFICATE DESIGNATING A RESIDENT AGENT AND ADDRESS AND PHYSICAL LOCATION OF THE OFFICE, PLACE OF BUSINESS OR LOCATION FOR THE SERVICE OF PROCESS UPON THIS CORPORATION WITHIN THIS STATE. THAT CERTIFICATE IS MARKED "EXHIBIT A" AND IS BY THIS REFERENCE MADE PART OF THESE ARTICLES.

IN WITNESS WHEREOF, EACH INCORPORATOR NAMED IN THESE ARTICLES HAS SIGNED THESE ARTICLES OF INCORPORATION.

Cynthia Kleid
CYNTHIA KLEID

STATE OF FLORIDA

COUNTY OF PUTNAM

I HEREBY CERTIFY THAT ON THIS DAY, BEFORE ME, A NOTARY PUBLIC, DULY AUTHORIZED IN THE STATE AND COUNTY NAMED ABOVE TO TAKE ACKNOWLEDGMENTS, PERSONALLY APPEARED CYNTHIA KLEID KNOWN TO ME TO BE THE PERSON DESCRIBED AS THE INCORPORATOR IN AND WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION, AND ACKNOWLEDGED BEFORE ME THAT THEY SUBSCRIBED THE SAID ARTICLES OF INCORPORATION. WITNESS MY HAND AND OFFICIAL SEAL IN THE STATE AND COUNTY AFORESAID.

THIS 13th DAY OF February, 1985.

Wanda M. Stumbo
NOTARY

Wanda M. Stumbo
Printed Name of Notary
MY COMMISSION EXPIRES:

NOTARY PUBLIC, STATE OF FLORIDA.
MY COMMISSION EXPIRES: Sept. 24, 1995.
BONDED FREE NOTARY PUBLIC UNDERWRITERS.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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PROFESSIONAL INSURANCE PERSONNEL, INC.

EXHIBIT A

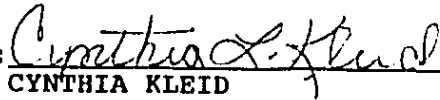
DESIGNATION OF

REGISTERED AGENT

THE ABOVE NAMED CORPORATION DOES HEREBY DESIGNATE CYNTHIA KLEID, AN INDIVIDUAL, RESIDENT OF THE STATE OF FLORIDA, AS ITS REGISTERED AGENT WITHIN THE MEANING OF THE FLORIDA GENERAL CORPORATION ACT, AND FURTHER DESIGNATES 235 EAST RIVER ROAD, EAST PALATKA, FLORIDA 32131 AS ITS REGISTERED OFFICE.

PROFESSIONAL INSURANCE PERSONNEL, INC.

BY:


CYNTHIA KLEID
REGISTERED AGENT

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ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

THE UNDERSIGNED HAS BEEN APPOINTED AS REGISTERED AGENT OF
PROFESSIONAL INSURANCE PERSONNEL, INC. AND DOES ACCEPT THAT
APPOINTMENT AND AGREES TO ACT AS SUCH.

PROFESSIONAL INSURANCE PERSONNEL, INC.


CYNTHIA KLEID
REGISTERED AGENT