

795000016169

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

800001415458  
-02/24/95--01125--005  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: AAA INSURANCE CENTER INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check  
for :

☒ \$70.00    ☐ \$78.75    ☐ \$122.50    ☐ \$131.25

FROM: AAA INSURANCE CENTER INC.  
Name (printed or typed)

846 SARNO ROAD  
Address

MELBOURNE, FLORIDA 32935  
City, State & Zip

(407) 259-1041  
Daytime Telephone number

FILED  
95 FEB 27 PM 1:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R95-457  
Dmc  
2/27/95

Gloria Reeves Battle  
gave auth by phone to  
change the address of  
the Registered Agent.  
2/27/95

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

**FILED**

95 FEB 24 PM 4:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

AAA INSURANCE CENTER INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

846 SARNO ROAD  
MELBOURNE, FLORIDA 32935

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500,000,000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GLORIA REEVES BATTLE  
2252 FLOWER TREE CIRCLE  
MELBOURNE, FLORIDA 32935

**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

SUSAN L. CABRAL  
285 GT. BARRINGTON ROAD  
HOUSATONIC, MA 01736

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

17TH day of FEBRUARY, 1995.

Susan L Cabral  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Articles of Incorporation  
Filing Fee - \$35**

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

**FILED**

SEP 24 PM 4:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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 the corporation is: AAA INSURANCE CENTER INC.

2. The name and address of the registered agent and office is:

GLORIA REEVES BATTLE

(Name)

~~846 S ARNO ROAD~~ 2252 FLOWER TREE CIRCLE

(P.O. Box not acceptable)

MELBOURNE, FLORIDA 32935

(City/State/Zip)

*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 the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

*Gloria R. Battle*  
(Signature)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL