

03/17/95

FLORIDA DIVISION OF CORPORATIONS

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3/17/95

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((((H950000003099))) ELECTRONIC FILING COVER SHEET
TO: DIVISION OF CORPORATIONS FROM: FOB-T CORP. AGENTU, INC.
DEPARTMENT OF STATE 8405 NW 53RD ST
STATE OF FLORIDA SUITE C-100
409 EAST GAINES STREET MIAMI FL 33166- 000-
TALLAHASSEE, FL 32399 CONTACT: LIDIA FERNANDEZ
FAX: (904) 922-4000 PHONE: (305) 599-0839
FAX: (305) 592-9591

((((H950000003099))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: INSURANCE CORNER II, INC.
FAX AUDIT NUMBER: H95000003099 CURRENT STATUS: REQUESTED
DATE REQUESTED: 03/17/1995 TIME REQUESTED: 13:40:57
CERTIFIED COPIES: 1 CERTIFICATE OF STATUS: 0
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03/17/95 15140 FAB-T CORPORATE AGENTS

(305) 992-9591

P. 002

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**ARTICLES OF INCORPORATION
OF
INSURANCE CORNER II, INC.**

The undersigned incorporator, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I. NAME

The name of the corporation shall be : **INSURANCE CORNER II, INC.**

The principal place of business of this corporation shall be: 3680 NW 11 ST., MIAMI, FL. 33125.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: **ONE HUNDRED (100) shares of One Dollar (\$1.00) par value common stock.**

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V. OFFICERS AND DIRECTORS

The names and street addresses of the initial Officers and Directors who shall hold office the first year of the corporation's existence or until their successors are elected, are:

ARMANDO J. SILVA TRUJILLO : 3680 NW 11 ST., MIAMI, FL 33125
GUIDO PEROU : 3680 NW 11 St., Miami, Fl 33125

ARTICLE VI INCORPORATOR

The name and street address of the incorporator to this Articles of Incorporation is :

JOSE G. TORRES CPA
18021 NW 41 pt.
MIAMI, FL. 33055

In witness Whereof, the undersigned incorporator has executed these Articles of Incorporation this 30th day of January, 1995

Signature of Incorporator:



Prepared by: Jose G. Torres
18021 NW 41st Pl.
Miami, FL 33055
(305) 642-1885

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03/17/95 15149 FAB T CORPORATE AGENTS

(305) 592-9591

P. 003

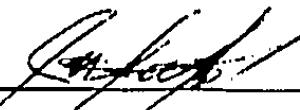
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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT \ REGISTERED OFFICE**

Pursuant to the provision of section 607.0501 Florida Statutes, the undersigned corporation, organized under the law 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: **INSURANCE CORNER, II, INC.**
2. The name and address of the registered agent and office is:

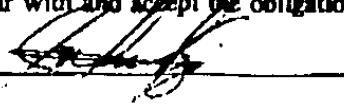
**JOSE C. TORRES CPA
18021 NW 41 PLACE
MIAMI, FL 33185**

Signature: 

Title: **INCORPORATOR**

DATE: **MARCH 17, 1995**

Having been named as registered agent and to accept service of process for the above named 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 agreed 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 obligation of my position as registered agent.

Signature: 

Date: **MARCH 17, 1995**

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