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TRANSMITTAL LETTER

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

900001441099
-03/28/95--01042--003
****131.25 ****131.25

SUBJECT: CITADEL RISK MANAGEMENT CORPORATION
(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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: BERNICE K. KAMINSKI

Name (printed or typed)

898 GLOUCESTER STREET.

Address

BOCA RATON, FLORIDA 33487

City, State & Zip

(407) 997-9349

Daytime Telephone number

REGISTER MAR 29 1995

FILED
95 MAR 27 AM 8:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

ARTICLES OF INCORPORATION

FILED
95 MAR 27 AM 8:23
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:

CITADEL RISK MANAGEMENT CORPORATION

ARTICLE II PRINCIPAL OFFICE

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

898 GLOUCESTER STREET
BOCA RATON, FLORIDA 33487

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOHN V. GOEPFERT
898 GLOUCESTER ST.
BOCA RATON, FLORIDA 33487

ARTICLE V INCORPORATOR(S)


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

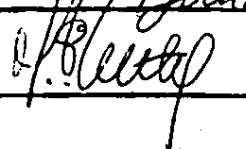
BERNICE K. KAMINSKI
898 GLOUCESTER ST.
BOCA RATON, FLORIDA 33487

MAURICE RUTTY
3960 ANTIGUA POINT DR.
BOCA RATON, FLORIDA 33487

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

23 day of MARCH, 1996.



Signature


Signature

Signature

Articles of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 907.0501 or §17.0501, 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: CITADEL RISK MANAGEMENT CORPORATION

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

JOHN V. GOEPFERT

(Name)

898 GLOUCESTER STREET

(P.O. Box or Mail Drop Box **NOT** acceptable)

BOCA RATON, FLORIDA 33487
(City/State/Zip)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

John V. Goepfert
(Signature)

3/23/95
(Date)