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TIMOTHY G. HAYES & ASSOCIATES, P.A.

ATTORNEYS AT LAW

LAKEVIEW PROFESSIONAL CENTER, 21859 STATE ROAD 54, SUITE 200, LUTZ, FLORIDA 33549

TIMOTHY G. HAYES

(813) 949-6525
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April 13, 1995

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

200001458162
-04/17/95--01090--005
*****70.00 *****70.00

Re: Accu-net Insurance, Inc.

Dear Sir or Madam:

Enclosed for filing please find the original and one copy of the Articles of Incorporation for the above corporation, along with a check in the amount \$70.00.

Sincerely yours,

Debrah Mayworth

DEBRAH D. MAYWORTH
Legal Assistant
HAYES & ASSOCIATES, P.A.
21859 State Road 54, Suite 200
Lutz, Florida 33549
(813) 949-6525

/dm
Encls.

APR 17 1995

SD



ARTICLES OF INCORPORATION
OF

ACCU-NET INSURANCE, INC.

The undersigned, acting as incorporator(s) of a corporation pursuant to Chapter 607, Florida Statutes, adopts the following Articles of Incorporation:

ARTICLE I - CORPORATE NAME

The name of this corporation shall be:

ACCU-NET INSURANCE, INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation are:

2224 Land O'Lakes Blvd.
Lutz, Florida 33549

ARTICLE III - CAPITAL STOCK

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 OFFICE

The name and address of the initial registered agent are:

Larry J. Shanks
2224 Land O'Lakes Blvd.
Lutz, Florida 33549

ARTICLE V - INCORPORATORS

The name(s) and street address(es) of the incorporator(s) to these articles of incorporation are:

Larry J. Shanks
P.O. Box 1472
Land O'Lakes, FL 34639

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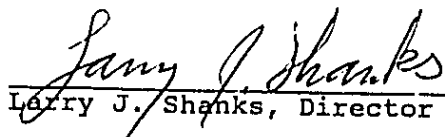
ARTICLE VI - DIRECTORS

This corporation shall have one director initially. The number of directors may be either increased or diminished from time to time by the By-Laws but shall never be less than one.

The name and address of the initial director of this corporation is as follows:

Larry J. Shanks - Director
P.O. Box 1472
Land O'Lakes, FL 34639

IN WITNESS WHEREOF the incorporator has hereunto set his hand and seal, this 4-12-95 day of April, 1995.


Larry J. Shanks, Director

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

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 the corporation is:

ACCU-NET INSURANCE, INC.

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

Larry J. Shanks
2224 Land O'Lakes Blvd.
Lutz, FL 33549

SIGNATURE _____

Larry J. Shanks
Larry J. Shanks
(Corporate officer)

TITLE _____ Director _____

DATE _____ April 12, 1995 _____

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.

SIGNATURE _____

Larry J. Shanks
DATE _____ April 12, 1995 _____

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