



FLORIDA DEPARTMENT OF STATE. Sandra B. Mortham Secretary of State

August 11, 1995

EMPIRE CORPORATE KIT COMPANY

MIAMI, FL

SUBJECT: AMERICA INSURANCE, INC.

REF: W95000016177

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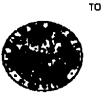
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Loria Poole Corporate Specialist FAX Aud. #: H95000008823 Letter Number: 695A00037686

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



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Loria Poole Corporate Specialist PAX Aud. #: H95000008823 Letter Number: 095400037792

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

ARTICLES OF INCORPORATION

OF

AMERICAN INSURANCE BROKERS, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organised under the laws of the State of Florida, and all rights duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be:

AMERICAN INSURANCE BROKERS, INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have porpetual existence.

ARTICLE III

The principal place of business and mailing address of this corporation shall be: 6446 S.W. 8 STREET MIANI FLORIDA 33144

ARTICLE IV

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural porsons might do, viz:

Transact any and all lawful business. Said corporation shall further have powers:

To have perpotual succession by its corporate name;

To sue and be sued, complain, and defend in its corporate name in all actions or proceedings;

To have a corporate seal, which may be altered at pleasure, and to use the same by causing it, or a facsimile thereof, to be impressed, affixed, or in any other manner reproduced;

RAY STORMONT EMPIRE CORPORATE KIT COMPANY 1492 West Fingler Street # 200 Mlamt, Florida 33135-2209 (305) 541-3694 * i

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To purchase, take, receive, lease, or otherwise acquire, own, hold, improve, use, and otherwise deal in and with real or personal property or any interest therein, whorever situated;

To soll, convoy, mortgage, pledge, create a socurity interest in, losso, exchange, transfer, and otherwise dispose of all or any part of its property and assets;

To lend money to, and use its credit to assist, its officers and employees in accordance with Florida Statute \$607.141;

To purchase, take, receive, subscribe for, or otherwise acquire, own, hold, vote, use, employ, soll, mortgage, land, pledge, or otherwise dispose of, and otherwise use and deal in and with, shares or other interests in, or obligations of, other domestic or foreign corporations, associations, partnerships, or individuals, or direct or indirect obligations of the United States or of any other government, state, territory, governmental district, or municipality or of any instrumentality thereof;

To make contracts and guarantees and incur liabilities, borrow money at such rates of interest as the corporation may determine, issue its notes, bonds, and other obligations, and secure any of its obligations by mortgage or pledge of all or any of its property, franchises, and income;

To lend money for its corporate purposes, invest and reinvest its funds, and take and hold real and personal property as security of the payment of funds so leaned or invested;

To conduct its business, carry on its operations, and have offices and exercise the powers granted by this act within or without this state;

To elect or appoint officers and agents of the corporation and define their duties and fix their compensation.

To make and alter bylaws, not inconsistent with its articles of incorporation or with the laws of this state, for the administration;

To make donations for the public welfare or for charitable, scientific, or educational purposes;

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To transact any and all lawful business which the board of directors shall find will be in aid of governmental policy;

To pay ponsions and establish pension plans, profit sharing plans, stock bonus plans, stock option plans, and other incentive plans for any or all of its directors, officers, and amployees and for any or all of the directors, officers, and employees of its subsidiaries:

To be a promoter, incorporator, partner, member, associate, or manager of any corporation, partnership, joint venture, trust, or other enterprise;

To have and exercise all powers necessary of convenient to effect its purposes;

To indomnify any person who by roason of the fact that he is or was a director, officer, omployed or agent of the corporation to the full extent as permitted by Florida Statue S607.014;

ARTICLE V

The aggregate number of shares which this corporation shall have authority to issue is the total sum of 100 shares, having an individual par value of \$ 1.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE VI

The name and street address of the initial Registered Agent of this corporation shall be: CLARA ELENA PINSIRO 3098 S.W. 110 AVENUE NIAMI FLORIDA 33165

ARTICLE VII

The initial board of pirectors shall consist of a total of 1 person(s) and the name and address of the person(s) whose to serve as an initial director(s) is:

CLARA BLENA PINETRO 3098 S.W. 110 AVENUE MIAMI PLORIDA 33165

ARTICLE VIII

The name and address of the incorporator executing these Articles of Incorporation is:

EMPIRE CORPORATE KIT OF AMERICA, INC.

1492 W. FLACLER STREET #200

HIAMI FLORIDA 33135

The undersigned has executed these Articles of Incorporation this 10 day of AUGUST ,1995.

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

TO

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.

| AMERICAN INCHRANCE BROKERS, INC. |
|---|
| rirst that (Name of Corporation) |
| (Name of Corporation) (Name of Corporation) (Florida) (osiring to organise under the laws of the State of (Florida) |
| Ash tem principal office, as indicated in principal office, as indicated in principal office, as indicated in the principal office in |
| (ngorporation has named |
| County of |
| (City) State of Florida, as its agent to accept service of process within |
| this sate. |
| |

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 TORETARY OF STATE Registored Agent 14 High 141 SAN FILED

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| PLEASE HEAD ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. APPLICATION Sundra B. Mortham Sociobility of State DOCUMENT P95000062659 AMERICAN INSURANCE BROKERS, INC. | | | | | |
|---|---|--|---|--|--|
| Proceed than of Process 6446 S.W. 81H STREET MIAMI FL 33144 | Stailing Address: 6446 S.W. OTH STREET MIAMI FL 33144 | | | | |
| ## all ove addresses are accorded any way. Into three flow Principal Office Address. # Applicable Suit. Apt. 6 etc. City X State Zii Plannes and Street Addresses of Each Officer and Street Officer. | Smite Apt # etc City & State Zip Cor or Director (Florida nonprofit cor) | antry Pondons must led at le Streed Address of Lact Officer and/or Directo I Use Post Office Box (| 4 Date incorporated or Ganiford To Do Department of Florida 5 FI I Number | Applied For Not Applied for Not Applied for Security a Cartificate of Status City / Statu / Zip | |
| | | | -10/0 | 9494-1-963995 273601066002 383,75 ++++383,75 | |
| B. Name and Address of Current Registered Agent PINEIRO, CLARA E 3098 S.W. 110TH AVENUE MIAMI FL 33165 | | Suite, Apt. #, E | Street Addrass (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc City State Zip Code | | |
| 10. I being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent Park Park Park Park Park Park Park Park | | | | | |
| SIGNATURE: SIGNATURE AND TYPED OF PRINTED HAME OF SIGNING OFFICER OR DIRECTOR | | | | | |