

CORPORATE ACCESS, INC.
1610 THE MASSACHUSETTS
TALLAHASSEE, FL 32303
(904) 222-2666

(Requestor's Name)

CORPORATE ACCESS, INC.

1610 THOMASVILLE RD
TALLAHASSEE, FL 32303

(City, State, Zip) (Phone #)

OFFICE USE ONLY

P95000062731

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. A American Auto Insurance Co
(Corporation Name) (Document #)
2. A American Auto Insurance Co
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 8-15 11:00
C. H. H. H.
☐ Mail out ☐ Will wait ☐ Photocopy ☒ Certified Copy
☐ Certificate of Status

| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

RECEIVED
55 AUG 15 11 08 59
DIVISION OF CORPORATIONS

FILED
95 AUG 25 11 09 25
TALLAHASSEE

Examiner's Initials

ARTICLES OF INCORPORATION

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:

A AMERICAN AUTO INSURANCE OF ALTAMONTE INC.

ARTICLE II PRINCIPAL OFFICE

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

710 E. ALTAMONTE DR. # 1011
ORLANDO FL. 32701

FILED
95 AUG 15 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III SHARES

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

100 Shares @ ONE DOLLAR EACH

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

'MARK' MANSOOR A. DOSANI
710 E. ALTAMONTE DR. # 1011
ORLANDO, FL. 32701.

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

① 'MARK' MANSOOR A. DOSANI,
710 E ALTAMONTE DR. # 1011, ORLANDO FL 32701

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

11th day of August, 1995

Mansoor A. Dosani
Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
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: A AMERICAN AUTO INSURANCE OF ALTAMONTE INC.
2. The name and address of the registered agent and office is:

MARK MANSOOR A. DOSANI
(NAME)
710 E. ALTAMONTE DR # 1011
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)
ORLANDO FL 32701
(CITY/STATE/ZIP)

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TALLAHASSEE
SECTION

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.

Mansoor A. Dosani
(SIGNATURE)

8-10-95
(DATE)