

TRANSMITTAL LETTER

P960000005743

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

100001690931
-01/17/96--01003--009
*****70.00 *****70.00

SUBJECT: Zadar Insurance Warehouse, Inc.
(Proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for
\$ 70.00.

FROM:

Darrell Zadar

Name (printed or typed)

4930 Park Blvd #7

Address

Pinellas Park, FL 34665

City, State, & Zip

813-546-7283

Telephone Number

FILED
96 JAN 17 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 18 1996 BSM

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

ARTICLES OF INCORPORATION

OF

Zadar Insurance Warehouse, Inc.

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06 JAN 17 PM 4:31
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:

Zadar Insurance Warehouse, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4930 Park Blvd.#7 Pinellas Park, FL. 34665

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Darrell Zadar
219 Normandy Circle East
Palm Harbor, FL. 34683

ARTICLE V INCORPORATOR(S)


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

Darrell Zadar
219 Normandy Circle East
Palm Harbor, FL 34683

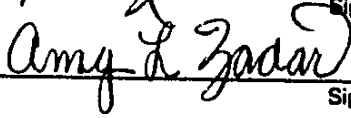
Amy Zadar
219 Normandy Circle East
Palm Harbor, FL 34683

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

January 4, 1996 day of _____, 19____.



Signature



Signature

Signature

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 817.0501, 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: Zadar Insurance Warehouse, Inc.

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

Darrell Zadar

(Name)


219 Normandy Circle East

(P.O. Box ~~not~~ acceptable)

Palm Harbor, FL 34683

(City/State/Zip)

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)

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