

Department of State Division of Corporations P.O.Box 6327 Tallahassee, FL 33314

900001712999 -02/19/96--01008--018 *****78.75 *****78.75

SUBJECT: ZUNIGA & Co. INSURANCE.

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$78.75 (Filing fee & Certificate)

FROM:

NOEL E. ZUNIGA 2091 NW 30th STREET #4 MIAMI, FL 33142 Ph: 305-633-9586

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N. Zuniga GAVE

AUTHORIZATION BY PHONE TO

CORRECT SUFFIX

DATE 2/15

DOC. EXAM 2/B

96 FEB 12 AH II: OR
SECRETARY OF STATE
TALLAHASSEE FLORID

ARTICLES OF INCORPORATION

96 FEB 12 AH 11: 06

OF

ZUNIGA & Co. INSURANCE, Inc. SECRETARY OF STATE TALL MANAGER FLORIDA

corporation pursuant to section 607.0202, Florida .Statutes, do hereby adopt the following Articles of

Incorporation

ARTICLE I

The name of the corporation shall be:

ZUNIGA & Co. INSURANCE, Inc.

ARTICLE II

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

> 2091 NW 30 ST #4 Miami Florida 33142 ARTICLE III

The number of stock that this corporation is authorized to have outstanding at any one time is: FIVE HUNDRED \$1.00 PAR VALUE.

ARTICLE IV

The name and address of the initial registered agent is:

NOEL E. ZUNIGA 2091 NW 30th ST #4 MIAMI FL, 33142 ARTICLE V

The name and street address of the incorporators to these Articles of incorporation are:

> NOEL E. ZUNIGA 2091 NW 30th ST #4, Miami, Florida, 33142

The undersigned has executed this Articles of Incorporation this 714 , feb , 1396 .

Noel E. Zuñiga

96 FEB 12 AH 11: 06

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

SECHETARY OF STATE TALLAHASSEF FLORIDA

Pursuant to the provisions of Section 607.325, 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:

ZUNIGA & Co. INSURANCE, Int.

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

NOEL E. ZUNIGA 2091 NW 30th ST #4 Miami Florida 33142

STONATURE

DATE 2/7/9

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

79600014213

2091 NW 30TH ST #4 MIANI FL 33142

PH: 305-634-5601

Ref: P96000014213

EIN: 65-0645928

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE FL 32314

Please find included the Articles of Dissolution of our corporation, effective today Sept. 16th, 1997.

NOEL E. ZUNIGA

Registered Agent President

> 000002295250--1 -09/17/97-01047--024 *****85.00 *****35.00

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Val. Diss

97 SEP 17 AH 8: 56
SECRETARY OF STATE
TALL AHASSET FLORING

ARTICLES OF DISSOLUTION

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:	
FIRST:	The name of the corporation is: ZUNTON & CO. INSURANCE, INC.
SECOND:	The articles of incorporation were filed on: February 12, 1996
THIRD:	(CHECK ONE)
	None of the corporation's shares have been issued.
•	The corporation has not commenced business.
FOURTH:	No debt of the corporation remains unpaid.
FIFTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SIXTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ed this 16th day of September , 19 97
Signatu	(By the chairman of vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)
	NOEL, E. ZUNIGA (Typed or printed name)
	PRESIDENT (Title)