

P96000024942

SECRETARY OF STATE  
CORPORATION DIVISION  
THE CAPITOL  
TALLAHASSEE, FLORIDA 32301

200001745892  
-03/18/96--01007--007  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Re: Articles of Incorporation

Dear Sirs,

Enclosed you will find my check in the amount of <sup>70.00</sup> ~~\$122.50~~  
which pays the filing fee, Resident agent fee, and ~~certified~~  
~~copy of the Articles of Incorporation~~ included herein.

Thank you for your consideration in this matter, and if you  
have any questions, please contact me immediately.

Very truly yours,

*Robert Abrams*  
ROBERT ABRAMS  
PRESIDENT

AMERICAN INSURANCE MANAGEMENT  
750 EAST SAMPLE RD.  
POMPANO BEACH, FL 33064  
(305) 943-0633 • FAX (305) 943-0634

DMC  
3-20-96

FILED  
96 MAR 15 PM 3:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF  
ABRAMS + ABRAMS SERVICES, INC.

FILED

96 MAR 15 PM 3:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I

NAME

The name of this Corporation shall be :

ABRAMS + ABRAMS SERVICES, INC.

ARTICLE II

PURPOSE

This corporation is organized for the purpose of operating as  
a CONTRACTOR and transacting any and all  
lawful business.

ARTICLE III

CAPITAL STOCK

This corporation is authorized to issue 1000 shares of \$1  
par value common stock.

ARTICLE IV

INITIAL PRINCIPAL OFFICE AND REGISTERED AGENT

The street address of the initial principal office and  
registered office of this corporation is

305 SUNSHINE DRIVE  
COCONUT CREEK, FL 33066  
and the name of the initial

registered agent of this corporation at the above  
address is:

ROBERT ABRAMS

#### ARTICLE V

##### 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:

ROBERT ABRAMS  
305 SUNSHINE DRIVE  
COCONUT CREEK, FL 33066

#### ARTICLE VI

##### INCORPORATORS

The name and address of the person signing these

Articles is:

ROBERT ABRAMS  
305 SUNSHINE DRIVE  
COCONUT CREEK, FL 33066

#### ARTICLE VII

##### POWERS

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

#### ARTICLE VIII

##### INDEMNIFICATION

The corporation shall indemnify any officer or director or former officer or former director to the full extent permitted by law.

ARTICLE IX

AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any Amendment to them, and any right conferred upon the shareholders is subject to this reservation.

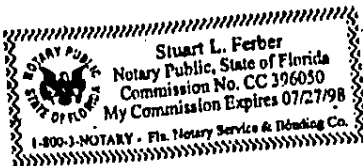
IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation on this

of 12<sup>TH</sup> DAY OF MARCH 1996

Robert Abrams

STATE OF FLORIDA  
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 12<sup>TH</sup> Day of MARCH, 1996, personally appeared before me, the undersigned authority, ROBERT ABRAMS to me well known and known to me to the individual described in and who executed the foregoing Articles of Incorporation, and acknowledged before me that they executed the same freely and voluntarily for the purpose therein expressed.



Stuart L. Ferber  
Notary Public

My commission Expires:

CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE  
SERVICE OF PROCESS WITHIN FLORIDA. NAMING AGENT UPON WHICH  
PROCESS MAY BE SERVED.

96 MAR 15 PM 3:35

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES OF STATE  
THE FOLLOWING IS SUBMITTED; TALLAHASSEE, FLORIDA

ABRAMS + ABRAMS SERVICES, INC

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE  
OF FLORIDA.

WITH ITS PRINCIPAL PLACE OF BUSINESS AT 305 SUNSHINE DRIVE,  
COCONUT CREEK, FL 33066 COUNTY OF BROWARD STATE OF  
FLORIDA. HEREWITH APPOINTS, ROBERT ABRAMS  
AS IT'S AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE

Robert Abrams

(CORPORATE OFFICER)  
ROBERT ABRAMS  
PRESIDENT

TITLE

DATE

3-14-96

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE  
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS  
CERTIFICATE, I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES  
AND RESPONSIBILITIES AS REGISTERED AGENT OF SAID CORPORATION,  
AND I HEREBY COMPLY WITH THE PROVISIONS OF ALL STATUTES  
RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE

Robert Abrams

DATE

3-14-96