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FILED
MAR 22 PM 9:25
TALLAHASSEE, FLORIDA

March 11, 1996

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

RE: A AAI South Florida Insurance Group, Inc.

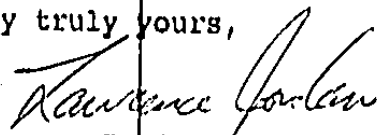
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****122.50 ****122.50

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above-named corporation.

Very truly yours,



Lawrence Jordan
A AAI South Florida Insurance
Group, Inc.
P.O. Box 5612
Ft. Lauderdale, FL 33310-5612
(954) 327-7272

4/3/96
IB



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 20, 1996

LAWRENCE JORDAN
POST OFFICE BOX 5612
FORT LAUDERDALE, FL 33310-5612

SUBJECT: A AA1 SOUTH FLORIDA INSURANCE GROUP, INC.
Ref. Number: W96000005956

We have received your document for A AA1 SOUTH FLORIDA INSURANCE GROUP, INC. and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6878.

Terri Buckley
Corporate Specialist

Letter Number: 496A00012655

ARTICLES OF INCORPORATION

of

A AAL South Florida Insurance Group, Inc.
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

A AAL South Florida Insurance Group, Inc.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue Five Hundred shares (500) of One Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	<u>Dorrian D. Brown</u>		
ADDRESS	<u>2149 NW 6 Street</u>		
CITY	<u>Fort Lauderdale</u>	FLORIDA	ZIP <u>33311</u>

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>A AAL South Florida Insurance Group, Inc.</u>		
ADDRESS	<u>1280 NW 119th Street</u>		
CITY	<u>Miami</u>	FLORIDA	ZIP <u>33167</u>

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have 2 (two) directors 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 (1). The names and addresses of the initial director(s) of the corporation are as follows:

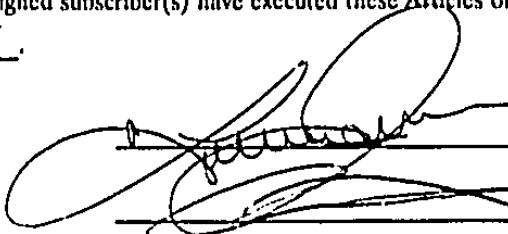
NAME	<u>Laurence Jordan</u>		
ADDRESS	<u>17228 NW 63 Court</u>		
CITY	<u>Miami</u>	STATE <u>Florida</u>	ZIP <u>33015</u>
NAME	<u>Carl T. Thompson Sr.</u>		
ADDRESS	<u>111 Lake Emerald Drive #205</u>		
CITY	<u>Oakland Pk</u>	STATE <u>Florida</u>	ZIP <u>33309</u>
NAME			
ADDRESS			
CITY		STATE	ZIP

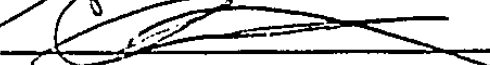
ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Laurence Jordan		
ADDRESS	17925 NW 63 Court		
CITY	MIAMI	STATE	FLA
			ZIP 33015
NAME	Carl T. Thompson Sr.		
ADDRESS	2149 NW 6 Street		
CITY	Fort Lauderdale	STATE	FLA
			ZIP 33311
NAME			
ADDRESS			
CITY		STATE	
			ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 26th day of February, 19 96.

 _____ (Seal)

 _____ (Seal)

_____ (Seal)

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

A. ONE South Florida Insurance Group, Inc.
(name of corporation)

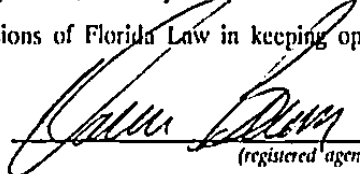
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 2149 NW 6 Street
Fort Lauderdale, Florida 33311

has named DARRIN D. BRUNN
located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.


(registered agent)

FILED
96 MAR 22 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA