

4/03/96  
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FLORIDA DIVISION OF CORPORATIONS

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STATE OF FLORIDA

FROM: MARIA ELENA CISNEROS

40 EAST GAINES STREET

963 S.W. 22 AVENUE

33418-0000

MIAMI FL 33184

TALLAHASSEE, FL 32399

FAX: (904) 922-4000

CONTACT: ROLANDO TRUJILLO

PHONE: (305) 541-0790

FAX: (305) 541-4015

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OR P.A.

DOCUMENT TYPE: FLORIDA PROFIT CORPORATION

NAME: MARIA ELENA CISNEROS INSURANCE AGENCY, INC.  
FAX AUDIT NUMBER: H96000004804

CURRENT STATUS: REQUESTED

DATE REQUESTED: 04/03/1996

TIME REQUESTED: 15:52:43

CERTIFIED COPIES: 0

CERTIFICATE OF STATUS: 1

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TALLAHASSEE, FLORIDA

APR 03 1996  
10:08 AM

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**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:  
MARIA ELENA CISNEROS INSURANCE AGENCY, INC.

**ARTICLE II. PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:  
963 SW 122ND AVENUE  
MIAMI, FL 33184

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TALLAHASSEE, FLORIDA

**ARTICLE III. SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:  
500 SHARES OF COMMON STOCK, \$1.00 PAR VALUE.

**ARTICLE IV. INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

MARIA ELENA CISNEROS  
963 SW 122ND AVENUE  
MIAMI, FL 33184

Prepared by: Maria E. Cisneros  
963 SW 122 Avenue  
Miami, FL 33184  
Tel: (305) 554-1938

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ARTICLE V INCORPORATOR(S)

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

MARIA ELENA CISNEROS, PRESIDENT  
963 SW 122ND AVENUE  
MIAMI, FL. 33184

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

28th day of March, 1996.

Maria Elena Cisneros  
Signature PRESIDENT

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Articles of Incorporation  
Filing Fee - \$35

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0801 or 617.0801, 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: MARIA ELENA CISNEROS INSURANCE AGENCY, INC.

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

MARIA ELENA CISNEROS  
(Name)

963 SW 122ND AVENUE  
(P.O. Box not acceptable)

MIAMI, FL. 33184  
(City/State/Zip)

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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.

Maria Elena Cisneros  
(Signature) REGISTERED AGENT

3/28/96  
(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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