

MAY-23-96 THU 10:15 A

*96000044796*

TRM88 96 FROM: DIVISION OF CORPORATIONS ELECTRONIC FILING COVER  
 12:25 PM PUBLIC ACCESS SYSTEM (((H96000007304)))  
 SHEET TO: DIVISION OF CORPORATIONS FROM: FILINGS, INC. DEPARTMENT OF  
 STATE 3732 NW 16TH ST STATE OF FLORIDA 409 EAST GAINES STREET  
 FT LAUDERDALE FL 33311-29 TALLAHASSEE, FL 32399 CONTACT: TERESA  
 ROMAN FAX: (904) 922-4000 PHONE: (904) 385-6735 FAX: (904)  
 385-6761 (((H96000007304))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION  
 OR P.A. NAME: BILTMORE INSURANCE SERVICES, INC. FAX AUDIT NUMBER:  
 H96000007304 CURRENT STATUS: REQUESTED DATE REQUESTED: 05/23/1996  
 TIME REQUESTED: 12:25:25 CERTIFIED COPIES: 0 CERTIFICATE OF  
 STATUS: 0 NUMBER OF PAGES: 3 METHOD OF DELIVERY: MAIL ESTIMATED  
 CHARGE: \$70.00 ACCOUNT NUMBER: 072720000101 Note: Please print  
 this page and use it as a cover sheet when submitting documents to the Division  
 of Corporations. Your document cannot be processed without the information  
 contained on this page. Remember to type the Fax Audit number on the top and  
 bottom of all pages of the document. (((H96000007304))) \*\* ENTER 'M' FOR MENU.  
 \*\*

*Hand for pickup*

FILED  
 96 MAY 23 PM 2:05  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

*[Handwritten signature]*  
*5/23*

RECEIVED  
 96 MAY 23 PM 1:27  
 DIVISION OF CORPORATIONS

117600000 2304

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

96 MAY 23 PM 2:05

FILED

ARTICLES OF INCORPORATION

OF

WILTMORE INSURANCE SERVICES, INC.

The undersigned, acting as incorporators of a corporation under the Florida General Corporation Act, adopts the following articles of incorporation for such corporation:

ARTICLE I

The name of the corporation is WILTMORE INSURANCE SERVICES, INC.

ARTICLE II

This corporation may engage in any activity of business permitted under the laws of the United States and of this State.

ARTICLE III

The maximum number of shares of stock that this corporation is authorized to have outstanding at any time is One Thousand (1000) shares of common stock, each share having the par value of \$1.00 per share.

ARTICLE IV

The amount of capital with which this corporation shall begin business is Five Hundred Dollars (\$500.00).

ARTICLE V

This corporation shall have perpetual existence.

ARTICLE VI

The initial street address of the principal office of this corporation is:

2703 Nassau Bend - Apt. F-2  
Coconut Creek, Florida 33066

Lawrence J. Miano, Esq.  
110 SE 6th Street Ste 1630  
Ft. Lauderdale, FL 33301  
FL Bar # 14316  
954-465-2468

1176000007804

NS600007304

**ARTICLE VII**

The corporation shall have One (1) director initially, whose name and street address is as follows:

Allen Albert  
2703 Nassau Bend - Apt. F-2  
Coconut Creek, Florida 33066

**ARTICLE VIII**

The name and street address of the subscriber to these Articles of Incorporation is as follows:

Allen Albert  
2703 Nassau Bend - Apt. F-2  
Coconut Creek, Florida 33066

**ARTICLE IX**

The name and address of the Registered Agent of this corporation is as follows:

Lawrence John Miano, Esquire  
110 Tower - Suite 1630  
110 S.E. 6th Street  
Ft. Lauderdale, Florida 33301

IN WITNESS WHEREOF, I/we have hereunto set my/our hand/hands and seal/seals, this 17 day of May, 1996.

Allen Albert  
ALLEN ALBERT

NS600007304

**DESIGNATION AND ACCEPTANCE OF REGISTERED AGENT**

Pursuant to the provisions of Florida Statute §607.0801, 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:

The name of the corporation is: **BILTMORE INSURANCE SERVICES, INC.**


The name of the Registered Agent is: **LAWRENCE JOHN MIANO**

The address of the Registered Agent/registered office is:

**110 Tower - Suite 1630  
110 S.E. 8th Street  
Fort Lauderdale, FL 33316**

**ACCEPTANCE**

Having been named as Registered Agent and designated to accept service of process for the above corporation, I hereby accept this 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.

  
**LAWRENCE JOHN MIANO  
Registered Agent for  
BILTMORE INSURANCE SERVICES, INC.**

**FILED**  
96 MAY 23 PM 2:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA