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PREMISE HALL
LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032
REFERENCE : 981466 80987A
AUTHORIZATION :
COST LIMIT : \$ PREPAID

ORDER DATE : June 10, 1996

ORDER TIME : 10:54 AM

ORDER NO. : 981466

CUSTOMER NO: 80987A

CUSTOMER: Fred M. Phelan, Jr., Esq
FRED M. PHELAN, JR., ESQ

Suite 108a
725 N. Ala
Jupiter, FL 33477

500001856755
-06/10/96--01018--004
*****122.50 *****122.50

DOMESTIC FILING

NAME: NOONAN INSURANCE SERVICES,
INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Michelle Bailey

EXAMINER'S INITIALS:

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 JUN 10 PM 3:01

RECEIVED
96 JUN 10 PM 2:08
DIVISION OF CORPORATIONS

FRED M. PHELAN, JR.

Attorney At Law
725 North A1A, Suite A-108
Jupiter, Florida 33477

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 JUN 10 PM 3:01

Member Florida
And New Jersey Bar

Telephone
(407) 747-9272

June 7, 1996

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

RE: NOONWINSURANCE SERVICES, INC.

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

This represents the cost of the filing fee, certified copy of Articles of Incorporation and fee for registered agent designation for the above named corporation.

Very truly yours,


Fred M. Phelan, Jr.

ARTICLES OF INCORPORATION

OF

NOONAN INSURANCE SERVICES, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 JUN 10 PM 3:01

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

NOONAN INSURANCE SERVICES, INC.

ARTICLE I NAME

The name of the corporation shall be: **NOONAN INSURANCE SERVICES INC.**

The principal place of business of this corporation shall be: **725 North A1A, Suite A-106
Jupiter, Florida 33477**

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: **One Thousand Shares (1,000)**
common stock no par value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

**MARGE M. NOONAN
873 Windermere Way
Palm Beach Gardens
Florida 33418**

**PETER J. NOONAN
873 Windermere Way
Palm Beach Gardens
Florida 33418**

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

MARGE M. NOONAN
873 Windermere Way
Palm Beach Gardens
Florida 33418

PETER J. NOONAN
873 Windermere Way
Palm Beach Gardens
Florida 33418

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 7th day of June, 1996

Signature(s) of Incorporator(s)

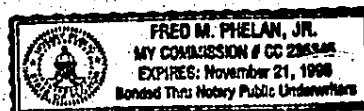
Marge M. Noonan
Peter J. Noonan

STATE OF FLORIDA
COUNTY OF PALM BEACH

THE FOREGOING instrument was acknowledged and sworn to before me this 7th day of June, 1996 by MARGE M. NOONAN and PETER J. NOONAN
(Name of Incorporator)
of NOONAN INSURANCE SERVICES, INC.
(Name of Corporation)

Notary Public

Fred M. Phelan, Jr.
My Commission Expires: _____



(SEAL)

ARTICLES OF INCORPORATION FILING FEE: \$

**CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 JUN 10 PM 3:01

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: NOONAN INSURANCE SERVICES, INC.

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

Peter J. Noonan

725 North A1A, Suite A-106

(P. O. BOX NOT ACCEPTABLE)

Jupiter, Florida 33477

(CITY/STATE/ZIP)

SIGNATURE Mary M. Noonan
(Corporate Officer)

TITLE President

DATE 6/7/96

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.

SIGNATURE Peter J. Noonan
(Registered Agent)

DATE 6/7/1996

REGISTERED AGENT FILING FEE: \$