

P96000057388

WITTE & CRAIG, P.A.

Attorneys at Law

LARRY F. WITTE
HUNTER B. CRAIG

201 SOUTHEAST 24th AVENUE
POMPANO BEACH, FLORIDA 33062
(954) 941-3533
FAX NO. (954) 942-0146

FILED
JUL - 3 1996
TALLAHASSEE, FLORIDA

June 28, 1996

DELIVERED BY FEDERAL EXPRESS

500001884485
-07/05/96--01019--014
****122.50 ****122.50

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Re: Incorporation of **EMY Marine Insurance, Inc.**

Dear Filing Officer:

Enclosed please find the original executed Articles of Incorporation of the above-referenced corporation and the Resident Agent Designation and Acceptance, together with our Trust Account check in the amount of \$122.50 representing the filing fee of \$35.00 for the Articles of Incorporation, filing fee of \$35.00 for the Designation and Acceptance of the Resident Agent and \$52.50 for a certified copy.

Please file the enclosed and return the certified copy at your earliest convenience. Thank you for your assistance with this matter. If you should require anything further, or have any questions, please do not hesitate to contact me at your convenience.

Sincerely,

Hunter B. Craig

Hunter B. Craig

HBC/mlc
Enclosures (3)

cc: Mr. Stephen Wood

BROWN JUL - 9 1996

**ARTICLES OF INCORPORATION
OF
HMY MARINE INSURANCE, INC.**

RECEIVED
JAN 11 1960
CORPORATION
STATE OF FLORIDA

The undersigned, a natural person competent to contract, does hereby make, subscribe and file these Articles of Incorporation for the purpose of organizing a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I

CORPORATE NAME

The name of this Corporation shall be: HMY MARINE INSURANCE, INC.

ARTICLE II

PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office and mailing address of the Corporation is 850 Northeast 3rd Street, Suite 213, Dania, Florida 33004.

ARTICLE III

NATURE OF CORPORATE BUSINESS AND POWERS

The general nature of the business to be transacted by this Corporation shall be to engage in any and all lawful business permitted under the laws of the United States and the State of Florida or any other state, country, territory or nation.

ARTICLE IV

CAPITAL STOCK

The maximum number of shares that this Corporation shall be authorized to issue and have outstanding at any one time shall be 1000 shares common stock having \$1.00 par value.

ARTICLE V

PREEMPTIVE RIGHTS

This corporation elects to have preemptive rights.

ARTICLE VI

REGISTERED AGENT AND
INITIAL REGISTERED OFFICE IN FLORIDA

The Registered Agent and the street address of the initial Registered Office of this Corporation in the State of Florida shall be:

Stephen Wood
2931 Northeast 16th Street
Pompano Beach, Florida 33062

ARTICLE VII

TERM OF EXISTENCE

This Corporation shall have perpetual existence.

ARTICLE VIII

BOARD OF DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to

any limitation set forth in these Articles of Incorporation. This Corporation shall have seven (7) Directors initially.

ARTICLE IX

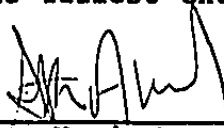
INCORPORATOR

The name of the person signing these Articles of Incorporation as the Incorporator is Stephen Wood, 2931 Northeast 16th Street, Pompano Beach, Florida 33062.

ARTICLE X

INDEMNIFICATION

This Corporation may indemnify any director, officer, employee or agent of the Corporation to the fullest extent permitted by Florida law.



Stephen Wood, Incorporator

**CERTIFICATE DESIGNATING REGISTERED AGENT
AND OFFICE FOR SERVICE OF PROCESS**

HMY MARINE INSURANCE, INC., a corporation existing under the laws of the State of Florida with its principal office and mailing address at 850 Northeast 3rd Street, Suite 213, Dania, Florida 33004, has named Stephen Wood whose address is 2931 Northeast 16th Street Pompano Beach, Florida, as its agent to accept service of process within the State of Florida.

ACCEPTANCE:

Having been named to accept service of process for the above named Corporation, at the place designated in this Certificate, I hereby accept the appointment as Registered Agent, and agree to comply with all applicable provisions of law. In addition, I hereby am familiar with and accept the obligations, duties and responsibilities as Registered Agent for said Corporation.



Stephen Wood

P96000057388

WITTE & CRAIG, P.A.

Attorneys at Law

201 SOUTHEAST 24th AVENUE
POMPANO BEACH, FLORIDA 33062

1.00002029051--5
-12/13/96--01079--021
*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 DEC 13 PM 3:12

APPROVED
AND
FILED

| NEW FILINGS | |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|--|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

P96000057388
12-13-96
RAC

**Statement of Change-
Registered Office or Agent**

Florida Department of State, Jim Smith, Secretary of State

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of Sections 607.0502, 617.1502, 607.1508 or 617.1508 Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: HMV Marine Insurance, Inc.

1b. Date of incorporation July 3, 1996; Document Number P96000057388.

2. The name and address of the current registered agent and office: Stephen Wood, 2931 Northeast 16th Street, Pompano Beach, Florida 33062.

3. The name and address of the new registered agent and office:
(P.O. Box Not Acceptable)
Frank Skip Smith, 2931 Northeast 16th Street, Pompano Beach, Florida 33062.

The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Shal D. Smith Jr.
signature

Frank D. Smith Jr. / President
typed of printed name and title

10-2-96
date

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 RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Shal D. Smith Jr.
(REGISTERED AGENT)

DATE

10-2-96

DIVISION OF CORPORATIONS, P.O. BOX 6372, TALLAHASSEE, FL 32214