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FLORIDA DIVISION OF CORPORATIONS  
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TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY  
CONTACT: RAY STORMONT  
PHONE: (305)541-3694

ACCT#: 072450003255

FAX #: (305)541-3770

NAME: VMR INSURANCE GROUP

AUDIT NUMBER.....H96000014750

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

PAGES..... 4

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**ARTICLES OF INCORPORATION  
OF  
VMR INSURANCE GROUP, CORP.**

The undersigned, for the purpose of forming a corporation under the laws of the State of Florida, does hereby adopt the following Articles of Incorporation:

**ARTICLE I: NAME**

The name of the corporation is: VMR INSURANCE GROUP, CORP.

**ARTICLE II: DURATION**

The period of duration of this corporation is perpetual unless dissolved according to law. Corporate existence shall commence upon the filing of these Articles of Incorporation.

**ARTICLE III: INITIAL REGISTERED OFFICE AND AGENT**

The initial Registered Office and Agent of this Corporation shall be:

Nestor Rodriguez  
797 Chimney Rock Road  
Weston, Florida 33327

**ARTICLE IV: PRINCIPAL PLACE OF BUSINESS**

The principal office address of this corporation is:

797 Chimney Rock Road  
Weston, Florida 33327

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### ARTICLE V: INITIAL BOARD OF DIRECTORS

The number of persons constituting the Board of Directors of this corporation shall be one (1) initially. The name and street address of the initial Director is:

NESTOR RODRIGUEZ  
797 CHIMNEY ROCK ROAD  
WESTON, FLORIDA 33327

### ARTICLE VI: STOCK

The maximum number of shares that this corporation is authorized to issue and have outstanding is One Thousand Shares.

### ARTICLE VII: INCORPORATOR

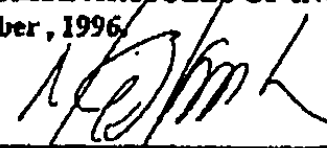
The name and address of the Incorporator of these Articles of Incorporation is:

NESTOR RODRIGUEZ  
797 CHIMNEY ROCK ROAD  
WESTON, FLORIDA 33327

### ARTICLE VIII: AMENDMENTS

This corporation reserves the right to amend or repeal the provisions of these Articles of Incorporation or any amendments thereto.

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR  
HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS  
16<sup>TH</sup> DAY OF October, 1996.

  
\_\_\_\_\_  
Incorporator

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT & REGISTERED OFFICE**

Pursuant to the provisions of the 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 this corporation is: **VMR INSURANCE GROUP, CORP.**
2. The name and address of the Registered Agent and Registered Office is:

**NESTOR RODRIGUEZ  
797 CHIMNEY ROCK ROAD  
WESTON, FLORIDA 33327**

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.

DATED: October 16, 1996

  
NESTOR RODRIGUEZ

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