

P960000097486

November 12, 1996

Department of State, Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

Re: INSURANCE DIRECT

Ladies and Gentlemen:

Please find enclosed for filing one original and one copy of the Articles of Incorporation of Insurance Direct. Also enclosed is a check in the amount of \$70.00 as the appropriate filing fee, and a separate check in the amount of \$52.50 for 1 certified copies.

Please return the copy, stamped to show the date of filing, to the undersigned.

Sincerely,



C. Whit Harris  
P. O. Box 1299, Ft. Walton Beach, FL 32549-1299

609-610-505  
W96-24502

800002004508---6  
-11/14/96--01048--020  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

800002004508---6  
-11/14/96--01048--021  
\*\*\*\*\*52.50 \*\*\*\*\*52.50

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 DEC -3 PM 1:08

on 12/13/96



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 DEC -3 PM 1:08

November 19, 1996

C. WHIT HARRIS  
POST OFFICE BOX 1299  
FORT WALTON BEACH, FL 32549

SUBJECT: INSURANCE DIRECT  
Ref. Number: W96000024502

We have received your document for INSURANCE DIRECT and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The designation of the registered agent must be at a Florida street address.

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6973.

Claretha Golden  
Document Specialist

Letter Number: 796A00052659

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DIVISION OF CORPORATIONS  
96 DEC -3 PM 1:08

November 26, 1996

Department of State, Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Re: INSURANCE DIRECT CORPORATION

Ladies and Gentlemen:

Please find enclosed for filing one original and one copy of the Articles of Incorporation of Insurance Direct Corporation. Also enclosed is a check in the amount of \$70.00 as the appropriate filing fee, and a separate check in the amount of \$52.50 for 1 certified copies.

Please return the copy, stamped to show the date of filing, to the undersigned.

Sincerely,



---

C. Whit Harris  
124 Miracle Strip Parkway, Ft. Walton Beach,,  
FL 32548

EFFECTIVE DATE

01/01/97

ARTICLES OF INCORPORATION

OF

INSURANCE DIRECT CORPORATION

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 DEC -3 PM 1:08

ARTICLE I

The name of the Corporation is Insurance Direct Corporation.

ARTICLE II

The principal place of business and mailing address of this corporation shall be 124 Miracle Strip Parkway, S. E., Ft. Walton Beach, , FL 32548.

ARTICLE III

The aggregate number of shares which the Corporation has authority to issue is 1,000 shares of common stock with no par value.

ARTICLE IV

The address of the initial registered office of the Corporation is 124 Miracle Strip Parkway, S. E., Ft. Walton Beach, , Florida 32548, and the name of the Corporation's initial registered agent for service of process at such address is C. Whit Harris.

ARTICLE V

The name and address of the Incorporator to these Articles of Incorporation is:  
C. Whit Harris, 124 Miracle Strip Parkway, Ft. Walton Beach,, FL 32548.

IN WITNESS WHEREOF, I have hereunto set my hand this 12<sup>th</sup> day of  
NOVEMBER, 1996.

ARTICLE VI

The effective date of incorporations is to be January 01, 1997.



C. Whit Harris  
124 Miracle Strip Parkway, Ft. Walton Beach,, FL  
32548

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 DEC -3 PM 1:09

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: Insurance Direct Corporation.
2. The name of the registered agent and office is:

C. Whit Harris  
124 Miracle Strip Parkway, S. E., Ft. Walton Beach, , Florida 32548

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.

SIGNATURE \_\_\_\_\_



DATE \_\_\_\_\_

11-12-96