# 196000100186

SECRETARY OF STATE CORPORATION DIVISION THE CAPITOL TALLAHASSEE, FL. 32301

40000002025064--5 -12/10/95--01137--009 ++++79.00 ++++79.00

RE: Articles of Incorporation

Dear Sirs,

Enclosed you will find my check in the amount of \$79.00 which pays the filling fee & Resident agent fee, included herein.

Thank you for your consideration in this matter, and if you have any questions, please contact me immediately.

Very truly yours,

F. I. E. D. 4: 20 96 DEC 10 PH 4: 20 SELLAHASSEE, FLORIGA

DEC 11.1996 BSB

# ARTICLES OF INCORPORATION

FILED

OF

AHERICAN ALL-WRITE INSURANCE, INCSECULIARY OF STATE TALLAHASSEE. FLORIDA

NAME

The name of this Corporation shall be :

AMERICAN ALL-WRITE INSURANCE, INC

# ARTICLE II

#### PURPOSE

This corporation is organized for the purpose of operating as a INSULANCE AGENCY and transacting any and all lawful business.

# ARTICLE III

# CAPITAL STOCK

This corporation is authorized to issue 1000 shares of \$1 par value common stock.

# ARTICLE IV.

# INITIAL PRINCIPAL OFFICE AND REGISTERED AGENT

The street address of the initial principal office and registered office of this corporation is

1483 So. Congress Ave

Delray Beach, Fl 33445

and the name of the initial

registered agent of this corporation at the above address is:

STURET FERBER

#### ARTICLE V

#### DIRECTORS

This corporation shall have one Director initially. The number of Directors may be either increased or diminished from time to time by the By-Laws but shall never be less than one. The name and address of the initial Director of this corporation is:

STUART FERBER 750 E. SAMPIERD POMPANO BEACH, F1 33064

# ARTICLE VI

# INCORPORATORS

The name and address of the person signing these Articles is:

STUART FERBER
750 E. SAMPLE Rd
POMPAND BEACH, F1 33064
ARTICLE VII

#### **POWERS**

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

## ARTICLE VIII

# INDEMNIFICATION

The corporation shall indemnify any officer or director or former officer or former director to the full extent permitted by law.

## ARTICLE IX

#### **AMENDMENT**

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any Amendment to them, and any right conferred upon the shareholders is subject to this reservation.

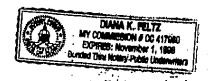
IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation on this

STATE OF FLORIDA COUNTY OF BROWARD

Personally appeared before me, the undersigned authority, STOALL FERSE to me well known and known to me to the individual described in and who executed the foregoing Articles of Incorporation, and acknowledged before me that they executed the same freely and voluntarily for the purpose therein expressed.

Notary Public

My commission Expires:



CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA. NAMING AGENT UPON WHICH PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED;

AMERICAN ALL-WRITE INSURANCE, INC

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA.

WITH ITS PRINCIPAL PLACE OF BUSINESS AT 1483 So. CONGRESS DELEAS BEACH , COUNTY OF PALM DEACHSTATE OF FLORIDA. HEREWITH APPOINTS, AS IT'S AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE	* Dlund
	(CORPORATE OFFICER)
TITLE	Director
DATE	146/96

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HERELY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS REGISTERED AGENT OF SAID CORPORATION, AND I HEREBY COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO-THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE	x Stimp	 	
DATE	12/6/96		:

96 DEC 10 PN 4: 20
SECHIARY OF STATE
TALLAHASSEE. FLORIDA