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FLORIDA DIVISION OF CORPORATIONS  
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TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: FAS-T CORP. AGENTS, INC.  
CONTACT: LIDIA FERNANDEZ  
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NAME: SMITH CROWN AND ASSOCIATES INSURANCE AGENCY

AUDIT NUMBER.....H9700000294

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

CERT. OF STATUS..0

PAGES..... 3

CERT. COPIES.....1

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**ARTICLES OF INCORPORATION****OF****SMITH CROWN AND ASSOCIATES INSURANCE AGENCY INC.**

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.

**ARTICLE I NAME**

The name of the corporation shall be:

**SMITH CROWN AND ASSOCIATES INSURANCE AGENCY INC.**

The principal place of business of this corporation shall be: 3744 S.W. 133rd Place  
Miami, Fl 33175

**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 value that this corporation is authorized to have outstanding at any one time is: 500 Shares at \$1.00 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):

PRESIDENT/TREASURER: Carlos Benitez 3744 S.W. 133rd Place  
Miami, Fl 33175

V/PRESIDENT-SECRETARY: Albert R. Alvarez 3585 S.W. 129th Ave.  
Miami, Fl 33175

Prepared by: Carlos Benitez  
3744 S.W. 133rd Place  
Miami, Fl 33175  
(305) 207-9838

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**ARTICLE VI INCORPORATOR(S)**

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

Carlos Benitez 3744 S.W. 133rd Place  
Miami, Fl 33175

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 07 day of January, 1997.

Signature(s) of Incorporator(s)

Carlos Benitez  
\_\_\_\_\_  
\_\_\_\_\_

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**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

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 \_\_\_\_\_

SMITH CROWN AND ASSOCIATES INSURANCE AGENCY INC.

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

Carlos Benitez 3744 S.W. 133rd Place

(P.O. BOX NOT ACCEPTABLE)

Miami, FL 33175

(CITY/STATE/ZIP)

SIGNATURE \_\_\_\_\_

Carlos Benitez  
(corporate officer)

TITLE \_\_\_\_\_

President

DATE \_\_\_\_\_

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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 \_\_\_\_\_

Carlos Benitez

DATE \_\_\_\_\_

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