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AMER CUNNINGHAM BRENNAN **FILED**
CO., L.P.A.

ATTORNEYS AND COUNSELLORS AT LAW 97 JAN -2 AM 11:29

SIXTH FLOOR, KEY BUILDING
159 SOUTH MAIN STREET
AKRON, OHIO 44308-1322

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

ERNEST L. CUNNINGHAM
(1907-1971)

BERNARD J. AMER
(1906-1985)

TELEPHONE 330/762-2411
TELECOPIER 330/762-9918

December 30, 1996

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

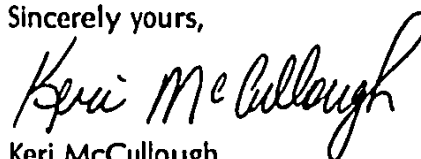
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*****70.00 *****70.00

Re: Executive Insurance Agency of Florida, Inc.

Dear Sir or Madam:

Enclosed please find the Articles of Incorporation along with a check in the amount of Seventy Dollars (\$70.00) to cover the cost of filing this form. Please file this as soon as possible and send proof/verification of such filing to the undersigned via federal express using the billing slip enclosed. If you have any questions please contact me at the above number. Thank you for your time and efforts regarding this matter.

Sincerely yours,



Keri McCullough
Corporate Paralegal

KM/lpz
Enclosures

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PH
1/8/97

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Executive Insurance Agency of Florida, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: John S. MacGowan
Name (Printed or typed)

1500 Corporate Center Way, Suite 203
Address

Wellington, FL 33414
City, State & Zip

(561) 795-5900
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

FILED

97 JAN -2 AM 11:29

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ALL FLORIDA STATE
TREASURY

ARTICLE I NAME

The name of the corporation shall be:

Executive Insurance Agency of Florida, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1500 Corporate Center Way, Suite 203
Wellington, FL 33414

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

John S. MacGowan
1500 Corporate Center Way, Suite 203
Wellington, FL 33414

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

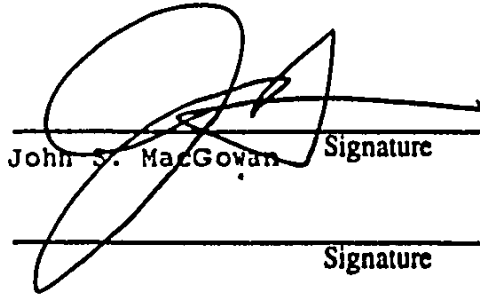
John S. MacGowan

1500 Corporate Center Way, Suite 203
Wellington, FL 33414

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

30 day of December, 1996.

(An additional article must be added if an effective date is requested.)



John S. MacGowan Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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

97 JAN -2 AM 11:29

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: Executive Insurance Agency of Florida, Inc.

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

John S. MacGowan

(NAME)

1500 Corporate Center Way, Suite 203

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Wellington, FL 33414

(CITY/STATE/ZIP)

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.

John S. MacGowan

(SIGNATURE)

12/30/96

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314