

VP970000006738

TRANSMITTAL LETTER

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

400002061864--7
-01/17/97--01057--009
*****78.75 *****78.75

SUBJECT: N & S Insurance Services, Inc.
(Proposed corporate name - must include suffix)

FILED
87 JAN 17 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: JUAN-CARLOS SANDINO
Name (Printed or typed)

6402 BUENA VISTA DR
Address

MARGATE FLORIDA 33063
City, State & Zip

(954) 979 2379
Daytime Telephone number

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

Handwritten initials and number: 1-2397

ARTICLES OF INCORPORATION

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

ARTICLE I

The name of the corporation shall be:

N & S INSURANCE SERVICES, INC.

ARTICLE II

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

**Margate Professional Centre
5750 Margate Blvd. Suite 104
Margate, Fl. 33063**

ARTICLE III

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

500 Shares at \$1.00 par value.

ARTICLE IV

The name and address of the initial registered agent is:

**Juan-Carlos Sandino
N & S Insurance Services, Inc.
Margate Professional Centre
5750 Margate Blvd. Suite 104
Margate, Fl. 33063**

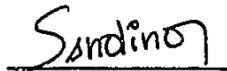
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ARTICLE V

The name and street address of the incorporator to these Articles of Incorporation is:

**Juan-Carlos Sandino
6402 Buena Vista Dr.
Margate, Fl 33063**

**The undersigned incorporator has executed these Articles of Incorporations this
15th day of January, 1997.**


signature

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES,
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAW 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 N & S INSURANCE SERVICES, INC.
2. The name and address of the registered agent and office is:

Juan-Carlos Sandino
N & S Insurance Services, Inc.
Margate Professional Centre
5750 Margate Blvd. Suite 104
Margate, Fl 33063

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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.

Sandino
signature

01-15-97
date