

P97000037000
AL Yoviene

Requestor's Name

290 N.W. 165th St. Plaza 200

Address

Miami FL 33169

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Argos International Insurance Brokers
(Corporation Name) (Document #)
2. Inc.
(Corporation Name) (Document #) 5.0000215.3885--0
-04/24/97--01083--004
****122.50 ****122.50
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

APR 25

BSB

FILED
97 APR 24 AM 8:50
STATE
TALLAHASSEE, FLORIDA

Examiner's Initials

ARTICLES OF INCORPORATION
of
ARGOS INTERNATIONAL INSURANCE BROKERS, INC.

FILED
97 APR 24 AM 8:50
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I
CORPORATE NAME

The name of the Corporation is ARGOS INTERNATIONAL INSURANCE BROKERS, INC..

ARTICLE II
PURPOSE

The purpose of the Corporation is to engage in any lawful act or activity for which a corporation may be organized under the corporation Law of the State of Florida other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the State of Florida Corporations Code.

ARTICLE III
REGISTERED OFFICE/AGENT
PRINCIPLE OFFICE

The street address of the Corporation's initial registered office in the State of Florida is 290 N.W. 165th Street, Plaza 200, Miami, Florida 33169; and the name of its initial registered agent at such address is AL YOVIENE.

ARTICLE IV
AUTHORIZED CAPITAL STOCK

The total number of shares of which the Corporation shall have the authority to issue are 3000 shares, and the par value of each share shall be \$6.00 per share.

ARTICLE V
PROVISIONS

The provisions for the regulations of the internal affairs of the Corporation shall be as set

forth in the bylaws.

ARTICLE VI
DURATION

The duration of the Corporation shall be Perpetual.

ARTICLE VII
BOARD OF DIRECTORS

The number of directors constituting the initial Board of Directors of the Corporation is One.

The name and address of each person who is to serve as members of the initial Board of Directors of the Corporation are as follows:

AL YOVINE
290 N.W. 165th Street, Plaza 200
Miami, Florida 33169

IN WITNESS THEREOF, the undersigned incorporator has executed these Articles of Incorporation on this, the 22nd day of April, 1997.


Incorporator AL YOVINE

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS
MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.901, FLORIDA STATUTES, THE
FOLLOWING IS SUBMITTED:

FIRST--THAT Argos International Insurance Brokers, Inc.
(NAME OF CORPORATION)

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF
FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE CITY OF

Miami, Florida

HAS NAMED Al Yoriene

LOCATED AT 290 NW 165th St, Plaza 200, Miami, FL 33169
(STREET ADDRESS AND NUMBER OF BUILDING,
POST OFFICE BOX ADDRESSES ARE UPACCEPTABLE)

CITY OF Miami, STATE OF FLORIDA, AS ITS AGENT
TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE Al Yoriene
(CORPORATE OFFICER)
TITLE president
DATE 4-22-97

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.

SIGNATURE Al Yoriene
RESIDENT AGENT
DATE 4-22-97