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L. ROBERT WILSON
150 S. University Dr., Suite B
Plantation, Florida 33324-3327

May 14, 1997

FLORIDA DEPARTMENT OF STATE Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Gentlemen:

Enclosed please find two (2) copies of Articles of Incorporation for AMERISAFE, INC.

Also enclosed is a check for \$122.50 covering all required certification and filing fees.

Please send a copy of the certified Articles of Incorporation to:

TAXSAVERS, INC. 150 South University Drive, Suite B Plantation, Florida 33324-3327 Attn: L. Robert Wilson

Very truly yours,

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L. ROBERT WILSON

Enclosures

cc: Taxsavers, Inc.

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ARTICLES OF INCORPORATION

-OF-

AMERISAFE, INC.

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

ARTICLE I NAME

The name of the corporation shall be:

AMERISAFE, INC.

ARTICLE II PRINCIPAL OFFICE

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

8931 N.W. 80th Drive Tamarac, Florida 33321

ARTICLE III SHARES

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

FIVE HUNDRED (500) shares of common stock having a par value of ONE (\$1.00) DOLLAR PER SHARE.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

L. ROBERT WILSON 150 S. University Dr., Suite B Plantation, Florida 33324

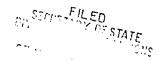
ARTICLE V INCORPORATOR

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

L. ROBERT WILSON
150 S. University Dr., Suite B
Plantation, Florida 33324-3327

The undersigned incorporator has executed these Articles of Incorporation at this 121 day of 1977.

Signature



<u>CERTIFICATE OF DESIGNATION OF</u> REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the requirements of Section 607.0501 and 607.0505, 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:

AMERISAFE, INC.

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

L. ROBERT WILSON
150 S. University Dr., Suite B
Plantation, Florida 33324-3327

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Nactual (Signature)

(Date)