P9700048698

TRANSMITTAL LETTER

Department of State -05/30/97--01075--011
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SUBJECT: BSI Insurance Services, Inc.

I enclose an original and $\frac{1}{2}$ copy(ies) of the Articles of Incorporation for the above corporation and a check in the amount of \$ 122.50.

Signature: Brokenle-

From:

B. Scott Isabella

Name

2644 SW 15 Street

Address

Deerfield Beach Florida 33442 City State Zip

(954) 429-3040 Telephone Number FILE DI 12: 01
BECRETASSEE, FLORIDA



ARTICLES OF INCORPORATION

OF

BSI Insurance Services, Inc.

ARTICLE I NAME

The name of the corporation shall be:

BSI Insurance Services, Inc.

ARTICLE II PRINCIPAL OFFICE

	The	principal	place of	business	and	malling	address	01
this	corporati	ion shall b	e:					
2644 SW 15 Street								_
		Deeri	field Bea	ch, FL 33	442			_

ARTICLE III CAPITAL STOCK

The	number of	shares of	stock that	this c	corporation	is
authorized to	have outst	anding at	any one tim	ne is:		
		One Hundre	ed (100)			

At	CTICLE IV	INITIAL R	EGISTERE	D AGENT	AND ADDRESS	;
	The name a	and addres	of the	initial	registered	agent
is:						
	В	. Scott Is	abella			
	2	644 SW 15	Street			
	D	eerfield B	each, FL	33442		
			<u></u>			-·
		ARTICLE	V INCOR	PORATOR		
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these Arti	Cles of f	ncorpora c i	011 13.			
				···		
	В	. Scott Is	abella			
	2	644 SW 15	Street			
		eerfield E	each, FL	33442		
	The under	signed has	execute	ed these	Articles o	f
Incorpora	tion this	28 m	day	of Ma	y	1997.
			15/	-11/1		
			B. Sco	ott Isab	ella, Incorp	porator

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

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:

BSI Insurance Services, Inc.

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

	B. Scott Isabella	
	2644 SW 15 Street	97 SE
	Deerfield Beach, FL 33442	LAH T
		30 PM
Signature:	Bickell-	FI ORIDA
Title:	Incorporator	
Date: <u>5/</u>	78/97	

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.

Signature: 5, 54/97

Date: 5/78/97