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FILED SECRETARY OF STATE ELVISION OF CORPORATIONS

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Office Use Only

P. Della Valle - 208 2941 hob Hill Pd. - 208 funnie, Et . 33322 -

CORPORATION NAME	C(S) & DOCU	MENT NUMB	BER(S), (if known):
1. (Corporation 1	Varne)	(Docu	ument #)
2. (Corporation Name)		(Doct	ument #)
(Corporation)	Name)	(Doc	ument #)
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Mail out Will	·		Certificate of Status
NEW FILINGS	'AMENDME	NTS	
Profit	Amendment		
NonProfit	Resignation of R	.A., Officer Direct	cor
Limited Liability	Change of Regist	tered Agent	
Domestication	Dissolution/With	ıdrawai	
Other	Merger		

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	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/
Foreign
Limited Partnership
Reinstatement
 Trademark
Other

## FILED ECRETARY OF STATE CHASION OF CORPORATIONS

#### ARTICLES OF INCORPORATION

#### PD V INSURANCE SERVICES, INC.

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The undersigned incorporator hereby forms a corporation under chapter 607 of the laws of the State of Florida.

#### **ARTICLE 1- NAME**

The name of this corporation is PDV INSURANCE SERVICES, INC.

#### ARTICLE 2- PRINCIPAL OFFICE

The street address of the initial principal office of the corporation shall be: 2541 Nob Hill Road # 208,Sunrise,Fl 33322

#### **ARTICLE 3- PURPOSE**

The corporation is organized for the purpose of sales of office supplies or in any activity that is lawful in this state or the United States.

#### ARTICLE 4- CAPITAL STOCK

This corporation is authorized to issue one thousand(1,000) shares of one dollar(\$1.00) par value common stock which shall be designated as "common shares".

#### ARTICLE 5- INITIAL REGISTERED AGENT AND OFFICE

The street address of the initial registered office of this corporation is 2541 Nob Hill Road # 208, Sunrise, Fl 33322 and the name of the initial registered agent of this corporation at that address is Patricia Della Valle.

#### ARTICLE 6- INITIAL BOARD OF DIRECTORS

The corporation shall initially have one(1) director to hold office until the first annual meeting of the stockholders and their successor shall have been duly elected and qualified or until their earlier resignation, removal from office or death. The number of directors may be either increased or decreased from time to time in accordance with the by-laws of the corporation. The name and address of the initial director is Patricia Della Valle, 2541 Nob Hill Road # 208, Sunrise,FI 33322.

#### **ARTICLE 7-INCORPORATOR**

The name and address of the incorporator signing these articles is: Patricia Della Valle, 2541 Nob Hill Road # 208, Sunrise,Fl 33322.

#### **ARTICLE 8- PRE-EMPTIVE RIGHTS**

every shareholder, upon the sale for cash of any new stock shall have the right to purchase his pro-rata share thereof at the price at which it is offered to others.

#### **ARTICLE 9-INDEMNIFICATION**

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

#### **ARTICLE 10- AMENDMENT**

This corporation reserves the right to amend or repeal any provision contained in these articles of incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

In witness whereof, the undersigned incorporator has executed these Articles of Incorporation on the date of signing.

Dated: June //\_, 1997

Patricia Della Valle, incorporator

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### 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:
- P D V INSURANCE SERVICES, INC.
- 2. The name and address of the registered agent and office is:

Patricia Della Valle 2541 Nob Hill Road # 208 Sunrise,Fl 33322

Patricia Pella Valle
Patricia Della Valle, incorporator

Dated: June // ,1997

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.

Patricia Della Valle
Date: June 1997