MIAMI, (305)552-5973 Phone# City/State/Zip

LOCAL REPRESENTATIVE TALLAHASSEE

Office Use Only

Examiner's Initials

CORPORATION	NAME(S) & D	CUMENT NUMI	BER(S), (if kno	wn):
1. CONTING	ENTAL Poration Name)	9ssuraa	/CF 60/	VSULTANTS IN
2. <u>(Corp</u>	oration Name)	(Doc	wnent #)	11
3(Corp	oration Name)	(Doc	eument #)	
4	oration Name)	(Doo	wnent #)	UU23045602 ***** 122.50 *****122.50
Walk in	Pick up time	2100	Certified	Copy
Mail out	Will wait	Photocopy	Certifica	
NEW FICINGS AT	Amendment			22
NonProfit		of R.A., Officer/ Direct	or	97 SEP 25 LYII: QUESTION OF CHARGINION
Limited Liability		Registered Agent		7 OH
Domestication :		/Withdrawal		97 s 773:0
Other	Merger			46.5 di
Critistatines	TREE.	SHATION	1	5 14 5
Annual Report Fictitious Name	Foreign	THE PROPERTY OF THE PARTY OF TH	/ /	7. C
Name Reservation	Limited Fa	/ 1\	alph	CA:
	Tyademark		IPIY	
	Ollier			

MICTACIAE L - DAME

The name of this comporation, is Continental Assurance Consultants Inc.

ARTICLE II - DURATION

This corporation shall have perpetual existence commencing of the date of the filling of these Articles with the Department of Stole

METTCLE III - PURPOSE

This corporation is organized for the purpose of transacting any or all lawful business.

ARTICLE IV .. CAPITAL STOCK

Phis corporation is authorized to issue 100 shares of \$5.00 pay value common stock which shall be designated "Common Shares".

ARTICLE V - PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this cornoration shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

MRTICLE VI - THITIAL REGISTERED OFFICE AND AGENT

The street address of the initial principal " office of this porporation is 8338 S.W. 8th Street, Miami, FL 33144.

and the name of the divitial registered agent of this corporation; at that address is Magaly Machado

ARTICLE VII - INTTIAL BOARD OF DIRECTORS

This corporation shall have 2 Director(s) opnstituting the cinitial board of Directors. The number of Directors may be excher increased or decreased from time to time by the Dybaws. The name(s) and address(es) of the initial Board of Directors of this corporation is (axe):

NAME

ADDITES

ARTICLE VIII - INCORPORATORS

The name and address of each person signing these Articles is:

NAME

ADDRESS

Magaly Machado

3488 S.W. 112th Avenue, Miami, FL 33165

Simon Seruya

3488 S.W. 112th Avenue, Miami, FL 33165

ARTICLE IX - INDEMNIFICATION

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

ARTICLE X - AMENDMENT

This corporation reserves the right to amend or repeal any prevision 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 subscriber has executed these Articles of Incorporation this 24th day of September , 1997

March Macano Substricts Study Study

Subscriber

Subscriber

STATE OF FLORIDA COUNTY OF DADE

Before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Majaly Mathada and Simon Serving known to be and known by me to be the persons who executed the foregoing Articles of Incorporation, and they acknowledged before me that they executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 24^{10} day of S_{00} to 1997.

011.0

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 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FOLLOWING IS SUBMITTED:
FIRSTTHAT Continental Assurance Consultants Inc. (Name of Corporation)
DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA
WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF Miami (City)
WITH ITS PRINCIPAL PLACE OF BOSINESS M. (City)
STATE OF Florida , HAS NAMED Magaly Machado (Name of Resident Agent)
STATE OF Florida (Name of Resident Agent)
LOCATED AT 8338 S.W. 8th Street (Street Address and Number of Building, Post Office Box
(Street Address and Number of Bullding, 1000 and Addresses are not Acceptable)
CITY OF Miami STATE OF FLORIDA, AS ITS AGENT TO
(City
ACCEPT SERVICE OF PROCESS WITHIN FLORIDA
SIGNATURE (Corporate Officer)
TITLE Sec./Treas.
DATE September 24, 1997
HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
HEREBY AGREE TO ACT IN THIS CAPACITY, MAD THE PROPER WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER
ADDRODMANCE OF MY DUTIES.
SIGNATURE Wasely Waearo
(Resident Agent)
(2) Continue of their
DATE September 24, 1997
DATE September 24, 1997
97
97 SEP