CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Signature

Name

Walk-In

Requested by:

Will Pick Up

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FILED SECRETARY OF STAIL DIVISION OF CORPORATIONS

97 OCT 15 AH 11: 33

	Art of Inc. File
	LTD Partnership File
	Foreign Corp. (1910) 123207615
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search S S
	Officer Search 97 C
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_	Fictitious Owner Search S
	Vehicle Search
	Driving Record
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	UCC 11 Retrieval
-	Courier
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ARTICLES OF INCORPORATION

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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:

Global Benefits Insurance, Inc.

ARTICLE II PRINCIPAL OFFICE

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

9200 Bonita Beach Road, Suite 208

Bonita Springs, FL 34135

ARTICLE III SHARES

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

1,000 (One Thousand)

<u>INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

The name and Florida street address of the initial registered agent are:

John Hooley

4532 Tamiami Trail East

Naples, FL 33962 Suite 401

<u>INCORPORATOR</u> <u>ARTICLE V</u>

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

James V. Ponte 4228 Crayton Road Naples, FL 34103

Signature/Incorporator

10/10/97

Date

James V. Ponte

(An additional article must be added if an effective date is requested.)

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 ofen

Signature/Registered Agent