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WILLIAM J. JOHNSON, JR.

SUITE 200 633 SOUTH ANDREWS AVENUE FORT LAUDERDALE, FLORIDA 33301

> (954) 524-4440 FAX (954) 524-5163

PALM BEACH COUNTY OFFICE

ONE LINCOLN PLACE 1900 GLADES ROAD Suite 401 BOCA RATON, FLORIDA 33431 November 6, 1997

REPLY TO: FT. LAUDERDALE

357410---01011--014

****122.50 ****122.50

Florida Dept. of State Division of Corporations Post Office Box 6327 Tallahassee, Fla. 32314

> Re: Articles of Incorporation of

> > Comprehensive Claims Solutions, Inc.

Dear Sir or Madam:

Enclosed please find the original and one copy of Articles of Incorporation for the above named corporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

JOHNSON, JR.

COMPREHENSIVE CLAIMS SOLUTIONS, INC.

633 S. Andrews Avenue

Suite 200

Fort Lauderdale, Florida 33301

Tel: 954-524-4440

ARTICLES OF INCORPORATION

OF

97 NOV 26 MM 10: 19 COMPREHENSIVE CLAIMS SOLUTIONS,

KNOW ALL MEN BY THESE PRESENTS: That the undersigned person, acting as incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation for such corporation:

ARTICLE I - NAME OF CORPORATION

The name of the corporation shall be <u>COMPREHENSIVE</u> CLAIMS SOLUTIONS, INC.

ARTICLE II - DURATION OF EXISTENCE

This corporation shall exist perpetually, commencing on the date these Articles are filed in the Office of the Secretary of State. ---

ARTICLE III - GENERAL PURPOSE

The purpose of this corporation is to engage in any activities or lawful business permitted for corporations under both the laws of the United State of America and the State of Florida.

ARTICLE IV - CAPITAL STOCK

(I) The corporation shall have authority to issue 1000 shares of common stock, all of one class, with a par value of One Dollar (\$ 1.00) per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The address of the principal office is 633 S. Andrews Avenue, Suite 200, Fort Lauderdale,

Florida 33301 ...

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of its initial registered agent is <u>William J. Johnson, Jr.,</u>

<u>Esquire, 633 S. Andrews Avenue, Suite 200, Fort Lauderdale, Florida</u>

33301

ARTICLE VII - BOARD OF DIRECTORS

- (I) The corporation shall have a minimum of two (2) director(s), and shall have two (2) director(s) initially. The number of directors may be increased from time to time by amendment of the Bylaws.
- (II) The name(s) and address(es) of the person(s) who is/are to serve as director(s) until the first annual meeting of the shareholders or until their successor is elected and qualify is/are:

ROBERT BARSON _____ 633 S. Andrews Avenue Suite 200 Fort Lauderdale, Florida 33301

GREG HALL
633 S. Andrews Avenue Suite 200
Fort Lauderdale, Florida 33301

ARTICLE VIII - INCORPORATORS

The name and address of the incorporator of the corporation is:

WILLIAM J. JOHNSON, JR., ESQUIRE
633 S. Andrews Avenue
Suite 200
Fort Lauderdale, Florida 33301
Telephone: 954-524-4440

IN WITNESS WHEREOF, the undersigned incorporator has executed the foregoing Articles of Incorporation this 24 day of November , 1997.

WILLIAM J. JOHNSON, JR.

CERTIFICATE OF DESIGNATING REGISTERED AGENT/REGISTERED OFFICE

COMPREHENSIVE CLAIMS SOLUTIONS, INC.

(Name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

That the above corporation, organized under the laws of the State of Florida, with its registered office as indicated in the Articles of Incorporation at 633 South Andrews Avenue, Suite 200, Fort Lauderdale, Florida 33301 has named William J. Johnson, Jr., Esquire located at the aforesaid address, as its registered agent to accept service of process within this state.

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 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: WIZLIAM J. JOHNSON, JR.

TITLE: Registered Agent

DATE: 11-24-9>

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