CAPITAL CONNECTION, INC. 417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222 PP970000100	FILED ECRETARY OF STATE INTEICH OF CORPORATIONS 97 DEC 19 AM 11:27
Southern Insurance Management, Inc.	
	Art of Inc. File LTD Partnership File DDD 23772465-4 Foreign Corp. File Foreign Corp. File *****122.50 L.C. File Fictitious Name File Fictitious Name File Art. of Amend. File RA Resignation Dissolution / Withdrawal Cert. Copy Photo Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Officer Search Officer Search Fictitious Search
Signature Requested by: 12/6/67 Name Date Time Walk-In Will Pick Up	Fictitious Owner Search

ARTICLES OF INCORPORATION

OF

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CORPORATIONS

FILED SECRETARY OF STATE

SOUTHERN INSURANCE MANAGEMENT, INC.

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: The name of the corporation is SOUTHERN INSURANCE MANAGEMENT, INC.

ARTICLE II: The corporation shall exist for perpetuity commencing on the date of execution of these Articles.

ARTICLE III: This corporation is organized for any and all lawful business allowed under the laws of the State of Florida or the United States of America.

ARTICLE IV: The corporation is authorized to issue 500 shares of common stock, with a par value of \$1.00 each.

ARTICLE V: The street address of the initial registered office of this corporation is 50 Highway A1A, Suite 103, Ponte Vedra Beach, Florida 32082, with a mailing address of 50 Highway A1A, Suite 103, Ponte Vedra Beach, Florida 32082, and the name of the initial registered agent at that address of this corporation is BARON L. BARTLETT, P.A..

ARTICLE VI: The principal place of business of this corporation shall be 1010 Big Pine Key, Atlantic Beach, Florida 32233.

ARTICLE VII: This corporation shall have one director initially. The number of directors may be either increased or decreased from time to time by the Bylaws, but shall never be less than one. The name and address of the initial director of this corporation are:

Donald H. Nachtman 1010 Big Pine Key Atlantic Beach, FL 32233

ARTICLE VIII: The name and address of the person signing these Articles is BARON L. BARTLETT, P.A., 50 Highway A1A, Suite 103, Ponte Vedra Beach, Florida 32082.

ARTICLE IX: The power to adopt, alter, amend or repeal Bylaws shall be vested in the Board of Directors and the shareholders. ARTICLE X: The 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 subscriber has executed these Articles of Incorporation this $\frac{1}{2}$ day of December, 1997.

Baron L. Bartleft, P.A

STATE OF FLORIDA COUNTY OF ST. JOHNS

1.1.

BEFORE ME, the undersigned authority, personally appeared BARON L. BARTLETT of BARON L. BARTLETT, P.A., to me well known and known to me to be the person described in and who executed the foregoing Articles of Incorporation and acknowledged to me that he executed said Articles freely and voluntarily and for the purposes expressed therein.

WITNESS my hand and seal this $\frac{1}{r}$ day of December, 1997.

NADINE G. MCFATTER COMMISSION # CC 358707 RY PUB EXPIRES MAR 23, 1998 BONDED THRI ATLANTIC BONDING CO., INC.

nadino A.n. Setto Notary Public, State of Florida

My Commission expires: Commission Number:

Personally known to me, OR
 Produced drivers license as identification
 Produced other identification

ACCEPTANCE OF REGISTERED AGENT

HAVING BEEN NAMED to accept service of process for SOUTHERN INSURANCE MANAGEMENT, INC., at the place designated in the Articles of Incorporation, I HEREBY AGREE TO ACT in this capacity and agree to comply with the provisions of all statutes relating to the property in complete performance of my duties.

Dated this $//^{th}$ day of December, 1997.

/Baron L. Bartlett, P.A.

