

P98000012445

Date January 28, 1998

Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
FEB - 9 AM 8:52

Re: J & R INSURANCE, INC., Inc.
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, 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,

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-02/06/98--01068--008
****122.50 ****122.50

RAUL PEREZ

(individual's name)

INT FINANCIAL CORP

(name of corporation)

MAILING ADDRESS OF CORPORATION

2141 SW 114TH AVE

DAVIE, FL 33325

PHONE

(954) 423-8054

Area Code

Number

Ext.

D. BROWN FEB - 9 1998

ARTICLES OF INCORPORATION

of
J & R INSURANCE, INC.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is: J & R INSURANCE, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue ONE THOUSAND shares (1000) of ONE Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME	J & R INSURANCE, INC.		
ADDRESS	4718 E 8TH CT		
CITY	HIALEAH	FLORIDA	ZIP 33013

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	BARBARA C. ALMEIDA		
ADDRESS	4718 E 8TH CT		
CITY	HIALEAH	FLORIDA	ZIP 33013

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	BARBARA C. ALMEIDA		
ADDRESS	4718 E 8TH CT		
CITY	HIALEAH	STATE FLORIDA	ZIP 33013
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

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ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	BARBARA C. ALMEIDA		
ADDRESS	4718 E 8TH CT		
CITY	HIALEAH	STATE	FLORIDA
		ZIP	33013
NAME			
ADDRESS			
CITY		STATE	
		ZIP	
NAME			
ADDRESS			
CITY		STATE	
		ZIP	

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 26TH day of JANUARY, 19 98.

Barbara C Almeida (Seal)

____ (Seal)

____ (Seal)

STATE OF FLORIDA)

COUNTY OF BROWARD)

SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared: BARBARA C ALMEIDA

Barbara C Almeida
Signature

FL DL# A453 063 64 630 0

Form of Identification

Signature

Form of Identification

Signature

Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that SHE executed these Articles of Incorporation, that I relied upon the form of identification of the above named person as indicated opposite each name, and that an oath (was)(was not) taken.

NOTARY RUBBER STAMP SEAL



RAUL D. PEREZ
COMMISSION # CC 689321
EXPIRES OCT 16, 2001
BONDED THRU
ATLANTIC BONDING CO., INC.

Witness my hand and official seal in the County and State last aforesaid this 26TH day of JANUARY, 1998.

RAUL PEREZ
Notary Signature

**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

CERTIFICATE OF REGISTERED AGENT

OF

J & R INSURANCE, INC.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 4718 E 8TH CT

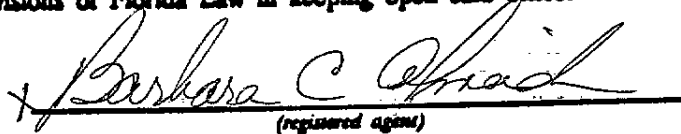
HIALEAH, FL 33013

has named BARBARA C. ALMEIDA

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.


(registered agent)

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