

*P98000016722*

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== PADRON ==  
== INSURANCE ==  
== AGENCY, ==  
== INC. ==  
== 1040 N.W. 35 AVE MIAMI, FL. 33125 / (305) 649-4185 ==  
== FAX - 649-4186 BPR : 339-5907 ==  
=====

02/10/98

DEPT OF STATE  
P.O.BOX 6327 TALLAHASSEE, FLA. 32314

300002435303  
-02/19/98--01059--015-G  
\*\*\*\*122.50 \*\*\*\*122.50

re:CORPORTATION

=====  
MEMO  
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ENCLOSE PLEASE FIND ALL PROPER DOCUMENTATION TO INCORPORATE  
PADRON INSURANCE GENCY, IF YOU NEED FURTHER ASSISTANCE PLEASE  
DO NOT HESITATE TO CONTACT US.

=====  
Yours truly,

  
Cesar E Padron

D. BROWN FEB 20 1998

**Articles of incorporation  
of  
PADRON INSURANCE AGENCY, INC.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 FEB 19 PM 12:43

The undersigned incorporators, 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 :

**PADRON INSURANCE AGENCY, INC.**

**Article II Principal Office**

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

**12345 SW 42 St  
Miami, Fl. 33175**

**Article III Capital Stock**

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

**Five hundred {500} shares of one dollar {1.00} par value  
common stock.**

**Article IV Initial Registered Agent and Address**

The name and address of initial registered agent is :

**Cesar E Padron  
12345 SW 42 St  
Miami, Fl. 33175**

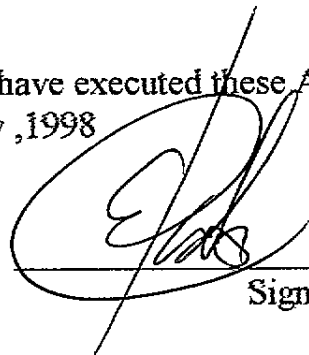
## Article V ,Incorporators

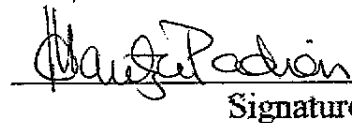
The names and street address of the incorporators to these Articles of Incorporation are

Cesar E Padron                      President and Secretary  
12345 SW 42 St  
Miami,Fl. 33125

Maritza C Padron                  Vice President and Treasurer  
12345 SW 42 St  
Miami,Fl. 33138

The undersigned have executed these Articles of Incorporation this  
19 day of January ,1998

 *president / secretary*  
\_\_\_\_\_  
Signature / Title

 *Vice president / treasurer*  
\_\_\_\_\_  
Signature / Title

**Certificate of Designation  
Registered Agent/Registered Office**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 FEB 19 PM 12:43

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

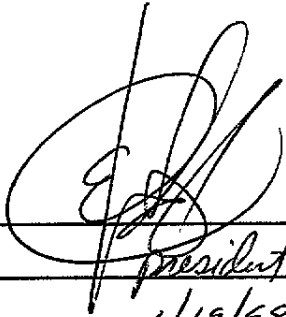
1- The name of the corporation is : **PADRON INSURANCE AGENCY, INC.**

2- The name and address of registered agent and office is : **Cesar E Padron**  
**12345 SW 42 St**  
**Miami, Fl. 33125**

Signature :

Title :

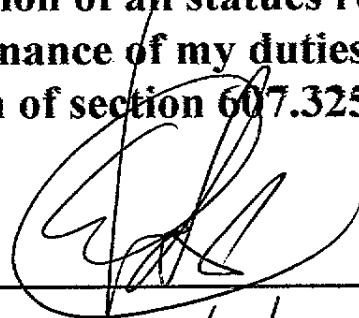
Date :

  
\_\_\_\_\_  
president / secretary  
1/19/98

Having been named to accept service of process for the above stated corporation , at the place designated in this certificate , I hereby agree to act in this capacity and I further agree to comply with the provision of all statutes relative to the proper and complete performance of my duties , and I accept the duties and obligation of section 607.325 , Florida Statutes

Signature :

date :

  
\_\_\_\_\_  
1/19/98