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FLORIDA DIVISION OF CORPORATIONS
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((((H98000005678 1)))

TO: DIVISION OF CORPORATIONS	FAX #: (850) 922-4001
FROM: FAS-T CORP. AGENTS, INC.	ACCT#: 071001002335
CONTACT: LIDIA FERNANDEZ	
PHONE: (305) 599-0839	FAX #: (305) 716-0346
NAME: MIKE MYERS INSURANCE AGENCY INC.	
AUDIT NUMBER..... H98000005678	
DOC TYPE..... FLORIDA PROFIT CORPORATION OR P.A.	
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** ENTER 'M' FOR MENU. **

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TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION
OF

MIKE MYERS INSURANCE AGENCY, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: MIKE MYERS INSURANCE
AGENCY, INC.

The principal place of business of this corporation shall be:

XXXX 1897 PALM BEACH LAKES BLVD., SUITE 218
WEST PALM BEACH, FL 33409

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time FIVE HUNDRED (500) WITH A PAR VALUE OF ONE DOLLAR (\$1.) PER SHARE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected.

is(are): G. MICHAEL MYERS, JR.

1897 PALM BEACH LAKES BLVD. SUITE 218
WEST PALM BEACH, FL 33409

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TALLAHASSEE, FLORIDA

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Prepared by: G. M. Myers Jr.
1897 Palm Beach Lakes Blvd # 218 WPB Fl 33409
(561) 684-1515

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ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this
articles of incorporation is(are):

G. MICHAEL MYERS, JR
1897 PALM BEACH LAKES BLVD SUITE#218
WEST PALM BEACH, FL 33409

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have)
executed these Articles of Incorporation this 20th
day of MARCH, 1998.

Signature(s) of Incorporator(s)

G M Myers Jr

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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

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:

MIKE MYERS INSURANCE AGENCY, INC.

2. The name and address of the registered agent and office is:

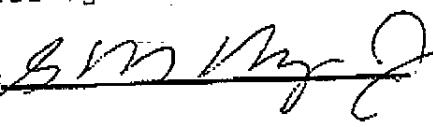
G. MICHAEL MYERS, JR

(P.O. BOX NOT ACCEPTABLE)

1897 PALM BEACH LAKES BLVD, SUITE 218
WEST PALM BEACH, FLORIDA 33409

(CITY/STATE/ZIP)

I accept the designation as registered agent

SIGNATURE 

TITLE PRESIDENT

DATE 3-20-98

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