## 998000011003

(Proposed corporate name - must include suffix)

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

SUBJECT:

CYPRESS UNDERWRITERS, INC.

1 0 0 0 0 2 4 7 5 2 5 1 -- 0 -04/01/98--01057--017 \*\*\*\*131.25 \*\*\*\*131.25

Enclosed is an original	and one(1) copy of the article	s of incorporation and a	check for :	_	,
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL CO	PY REQUIRED	_	
FROM: Ronald E. Chapman Name (Printed or typed)  3588 Cypress Wood Court Address			ALLAHASSEE, FLOKIO	98 APK - I PM II 3	FILED
-	Lake Worth, Florida 33467 City, State & Zip			• · · · · ·	-
-	(954) 772-5061	Felephone number			

NOTE: Please provide the original and one copy of the articles.

QN 4-3-98

## ARTICLES OF INCORPORATION

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 NAME

The name of the corporation shall be:

CYPRESS UNDERWRITERS, INC.

PRINCIPAL OFFICE ARTICLE II

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

5900 N. Andrews Avenue, Suite 800 Fort Lauderdale, Florida 33309

SHARES ARTICLE III

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

1000 Shares

## INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Ronald E. Chapman 3588 Cypress Wood Court 33467 Lake Worth, Florida

INCORPORATOR ARTICLE V

The name and address of the incorporator to these Articles of Incorporation are:

Ronald E. Chapman

3588 Cypress Wood Court Lake Worth, Florida

(An additional article must be added if an effective date is requested.)

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 act in this capacity. I further 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

DDE Croxma Signature/Registered Agent