

P 980000 61860

TRANSMITTAL LETTER

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

FILED  
98 JUL 13 AM 9:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: Insurance Plus, Inc  
(proposed corporate name-must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00  
Filing Fees &  
Registered Agent  
Designation

☐ \$122.50  
Filing Fees,  
Registered Agent  
Designation & Certified Copy

Please return the photocopy to me with the filing date stamped on it.

FROM: Hyman Levy  
9611-Enchanted Point Lane  
Boca Raton, FL 33496  
561-451-9884

600002586726--2  
-07/13/98-01085-014  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

F. CHESSER JUL 14 1998

## ARTICLES OF INCORPORATION

The name of the corporation shall be: INSURANCE PLUS, INC.

The principal place of business and mailing address of the corporation is:  
9711 - ENCHANTED POINT LANE  
BOCA RATON, FL. 33496

The corporation shall have the authority to issue 1000 shares of stock.

The terms of existence is perpetual.

The purpose of the corporation is :

INSURANCE AND INVESTMENTS

The registered agent and the registered address of the corporation is:

HYMAN LEVY  
9711 - ENCHANTED POINT LANE  
BOCA RATON, FL. 33496

The initial Board of Directors shall have 2 member(s) whose name(s) and address(es) is/are as follows:

HYMAN LEVY  
9711-ENCHANTED POINT LANE  
BOCA RATON, FL. 33496 PRES.

SHELDON ACKERMAN  
18151-NE 31<sup>ST</sup> COURT  
AVENTURA, FL. 33160 VICE PRES.

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

The name and address of the incorporator is:

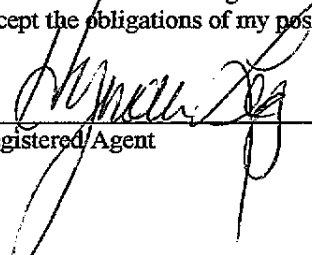
HYMAN LEVY  
9711-ENCHANTED POINT LANE  
BOCA RATON, FL. 33496

Dated 7/7/98

  
Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 7/7/98

  
Registered Agent

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