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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 922-4001

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FLORIDA PROFIT CORPORATION OR P.A.**

**F.M.G. INSURANCE CORP.**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF  
F.M.G. INSURANCE CORP.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of the corporation shall be:

F.M.G. INSURANCE CORP.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things therein mentioned, as fully and to the same extent as natural persons might do, viz:

PREPARED: ANA DALMAU ARES  
3636 S.W. 87TH AVENUE  
MIAMI FL. 33165  
(305) 448-2072

- (1) Transact any and all lawful business,
- (2) Said corporation shall further have powers:  
To have perpetual succession by its corporate name,

932 71St. Street  
Miami Beach, Fl 33141

#### ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

FRANK J. GUZMAN  
15121 NW 87th Ct  
HIALEAH, FL. 33018

The principal office shall be:

932 71 STREET  
MIAMI BEACH, FL. 33141

ARTICLE VI

The initial Board of Directors shall consist of a total of (2) person, and the name and address is:

FRANK J GUZMAN  
15121 NW 87TH CT  
HIALEAH, FL 33018

PRESIDENT


GLORIA M GUZMAN  
15121 NW 87TH CT  
HIALEAH, FL 33018

VICE-PRESIDENT  
SECRETARY, TREASURER

The name and address of the incorporator executing these Articles of Incorporation is:

FRANK J GUZMAN  
15121 NW 87TH CT  
HIALEAH, FL 33018

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation, this 1st day of January, 1998.

  
\_\_\_\_\_  
FRANK J. GUZMAN

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provision of sections 607.0501 or 617.0501, 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:

F.M.G. INSURANCE CORP.

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

FRANK J GUZMAN  
15121 NW 87TH CT  
HIALEAH, FL 33018

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.

SIGNATURE



SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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