

P99000004631

TRANSMITTAL LETTER

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

100002739561--4
-01/13/99--01050--004
*****78.75 *****78.75

SUBJECT: BEST INSURANCE GROUP INCORPORATED

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 78.75.

From: D Guerrier

Name

Address

City, State, & Zip

Telephone Number

305 Somerset Way

Weston, FL 33326-2985

954-341-BEST (2378)

99 JAN 13 PM 1:02
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1-15-99
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99 JAN 13 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

BEST INSURANCE GROUP INCORPORATED

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: BEST INSURANCE GROUP INCORPORATED.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 305 Somerset Way, Weston, Florida 33326-2985.

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at anyone time is: 100.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The initial registered agent for the corporation is Gary Marc. The initial registered address for the corporation is 2801 North Course Drive, Unit F 207, Pompano Beach, FL 33069.

ARTICLE V INCORPORATORS

The names and addresses of the incorporators to these Articles of Incorporation are:

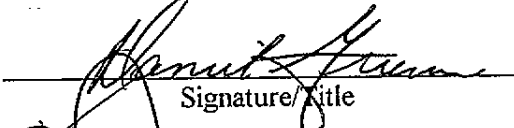
President: Daniel John Guerrier
Address: 305 Somerset Way
Weston, FL 33326-2985

Vice President: Dorothy Mae Guerrier
Address: 305 Somerset Way
Weston, FL 33326-29885

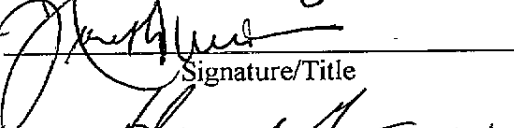
Secretary: Dorothy Mae Guerrier
Address: 305 Somerset Way
Weston, FL 33326-2985

Treasurer: Daniel John Guerrier
Address: 305 Somerset Way
Weston, FL 33326-2985

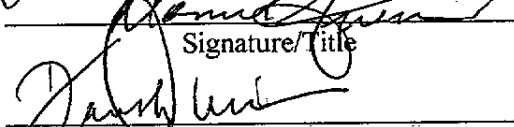
The undersigned have executed these Articles of Incorporation this 11th day of December
1998.



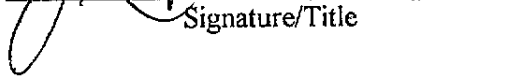
Signature/Title



Signature/Title



Signature/Title



Signature/Title

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, 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.

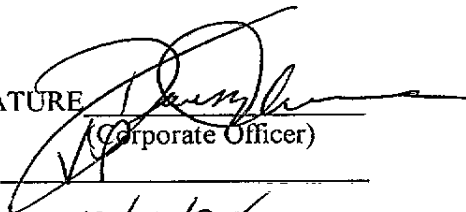
1. The name of the corporation is: Best Insurance Group Incorporated.

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

Gary Marc
(NAME)

2801 North Course Drive, Unit F 207
(STREET ADDRESS)

Pompano Beach, Florida 33069
(CITY/STATE/ZIP)

SIGNATURE 

(Corporate Officer)

TITLE 

DATE 12/11/98

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 

DATE 12/11/98

REGISTERED AGENT FILING FEE: \$35.00

FILED
99 JAN 13 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA