

1. P990000044767

TRANSMITTAL LETTER

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

800002873778--3
-05/13/99--01062--006
*****78.75 *****78.75

SUBJECT: FLORIDA INSURANCE INSTITUTE, 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 Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: FANI JANVIER
Name (Printed or typed)
775 NE 79 STREET STE D
Address
MIAMI, FL 33138
City, State & Zip
305 751 6819 305 571 8027
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1999 MAY 13 PM 4: 28

FILED

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

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:

FLORIDA INSURANCE INSTITUTE, INC

ARTICLE II PRINCIPAL OFFICE

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

775 NE 79 STREET , STE D, MIAMI, FL 33138

ARTICLE III SHARES

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

1000 at 1¢ each

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

FANI JANVIER - PRESIDENT 461 NE 76 STREET, MIAMI, FL 33138

ARTICLE V INCORPORATOR

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

FANI C. JANVIER - PRESIDENT 461 NE 76 STREET, MIAMI, FL 33138

PEDRONY JANVIER - TREASURER 461 NE 76 STREET, MIAMI, FL 33138

ANDRE CALIXTE - SECRETARY 461 NE 76 STREET, MIAMI, FL 33138


Signature/Incorporator

5-11-99
Date

(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


Signature/Registered Agent

5-11-99
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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