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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 922-4001

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Account Name : FAS-T CORP. AGENTS, INC.

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FLORIDA PROFIT CORPORATION OR P.A.**PARADISE INSURANCE AGENCY INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

B. McKnight JUN 14 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 14, 1999

FAS-T CORP

SUBJECT: PARADISE INSURANCE AGENCY INC.
REF: W99000013764

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FAX Aud. #: H99000014236
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ARTICLES OF INCORPORATION
OF
PARADISE INSURANCE AGENCY INC

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be:

PARADISE INSURANCE AGENCY INC

The principal place of business of this corporation shall be:

11117 W. OKEECHOBEE RD. SUITE # 116 HIALEAH GARDENS, FL 33018

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

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

100 SHARES PER \$1.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

VIVIAN M. RODRIGUEZ
ERNESTO RODRIGUEZ JR
16406 TURQUOISE TRAIL
WESTON, FL 33331

Prepared By: Paradise Insurance Agency
11117 W. Okeechobee Road
Suite No 116
Hialeah, Gardens Florida 33018
Phone#(305)-556-7400

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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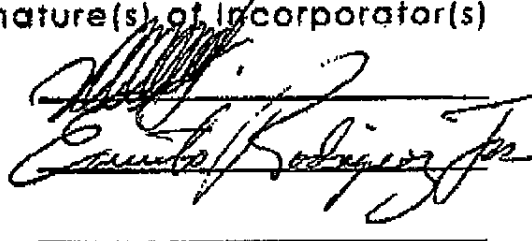
ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

VIVIAN M. RODRIGUEZ
ERNESTO RODRIGUEZ JR
16406 TURQUOISE TRAIL
WESTON FL 33331

IN WITNESS WHEREOF, the undersigned incorporator(s)
has (have) executed these Articles of Incorporation
this, 10th day of JUNE 1999

Signature(s) of Incorporator(s)

A handwritten signature in dark ink, appearing to read "Ernesto Rodriguez Jr.", is written over a horizontal line. The signature is stylized and cursive.

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

Pursuant to the provisions of Section 607.325, 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:

PARADISE INSURANCE AGENCY INC

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

VIVIAN RODRIGUEZ

(P.O. BOX NOT ACCEPTABLE)

11117 W. OKEECHOBEE RD. SUITE # 116 HIALEAH GARDENS

FL33331

(CITY/STATE/ZIP)

SIGNATURE [Signature]

TITLE President

DATE 6/10/99

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE [Signature]

DATE 6/10/99

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