

September 24, 1999

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

*****70.00 *****70.00

SUBJECT: INCORPORATION OF

W.H.W. INSURANCE AND FINANCIAL SERVICES, INC.

Dear Secretary of State:

Enclosed find one original and a copy of the Articles of Corporation of W.H.W. INSURANCE AND FINANCIAL SERVICES, INC. and a check for:

X \$70.00

\$78.75

\$122.50

\$131.25

Filing Fee

Filing Fee

Filing Fee

Filing Fee,

&Certificate

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM:

William H. Walters Name (Printed or typed)

> 7881 S.W. 3rd. Street Address

N. Lauderdale, Florida 33068 City, State & Zip

> 954-722-4190 Daytime Telephone Number



ARTICLES OF INCORPORATION

W.H.W. INSURANCE AND FINANCIAL SERVICES

SCO ANIII.S. The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Coxi Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be W.H.W. INSURANCE AND FINANCIAL SERVICES, INC.

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 7881 S.W 3rd Street, N. lauderdale, Fl 33068

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares at no par value.

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: William H. Walters at 7881 S.W. 3rd. Street N. Lauderdale, Fl 33068.

INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation are: William H. Walters at 7881 S.W. 3rd. Street N. Lauderdale, Fl 33068

ARTICLE VI **DIRECTORS**

The corporation shall have one (1) director, and the initial director shall be: William H. Walters at 7881 S.W. 3rd. Street N. Lauderdale, FI 33068

Signature/Incorporator Date

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

Date