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Department of State Division of Corporation P. O. Box 6327	ons	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · ·
Tallahassee, FL 3231	4	· -	
SUBJECT: S	ERVICE STATIO	ON INSURA	NCE PROGRAM
ي .			00029715222 -08/27/9901001002 *****78.75 *****78.75
Enclosed is an origina	al and one(1) copy of the articles	of incorporation and a c	heck for: $\sum_{i=1}^{n} 9_i$
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fée, Certified Copy & Certificate of Status
FROM:		ADDITIONAL CO	ECEIVI ME 26 PM CN OF GORFO
	660 E. JEFF	CLSON STA	公司 マーフ マーフ マーフ マーフ マーフ マーフ マーフ マーフ
•	TALLA HASSEE City,	5, F2. 32 State & Zip	301 \w
	(850) 222 - Daytime T	7710 Telephone number	- Dyst
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NOTE: Please provide the original and one copy of the articles.

W8/26



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 30, 1999

MANG LAW FIRM 660 E. JEFFERSON ST. TALLAHASSEE, FL 32301

SUBJECT: SERVICE STATION INSURANCE PROGRAM SERVICES OF

FLORIDA, INC.

Ref. Number: W99000020072

We have received your document for SERVICE STATION INSURANCE PROGRAM SERVICES OF FLORIDA, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0803, Florida Statutes, requires that the board of directors never have fewer than three directors.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6878.

Letter Number: 199A00043202

Alan Crum Document Specialist

Division of Corporations - P.O. ROY 6397 Tollahoggo Florida 20214

ARTICLES OF INCORPORATION

SERVICE STATION INSURANCE PROGRAM SERVICES OF FLORIDA, INC.

ARTICLE I

Name

The name of this Corporation is Service Station Insurance Program Services of Florida, Inc.

ARTICLE II

Term

The term for which this Corporation shall exist is perpetual.

ARTICLE III

Principal Office

The principal office and mailing address of the Corporation is at 5950 Hazeltine National Drive, Suite 650, Orlando, Florida 32822.

ARTICLE IV

<u>Purposes</u>

The purpose or purposes for which this Corporation is formed are:

- 1. To act as a purchasing group for the purchase of liability insurance for its members.
- 2. To transact any lawful business for which corporations may be incorporated under the Florida Business Corporation Act.
- 3. To do such other things as are incidental to the above or necessary or desirable in order to accomplish the above.

ARTICLE V

Initial Board of Directors

The number of Directors constituting the initial Board of Directors of this

Corporation shall be one (1). The number of Directors may be increased or decreased from time
to time in accordance with the Bylaws but shall never be less than one (1). All Directors of the
Board shall be elected or appointed in the manner and for the terms prescribed in the Bylaws of
the Corporation. The name and address of the person who is to serve as the initial Director is:

JAMES J. MC CAHILL 1700 Route 3 West Clifton, New Jersey 07013

ARTICLE VI

Registered Agent

The name and address of the initial Registered Agent of this Corporation is:

Douglas A. Mang, Esquire Mang Law Firm, P.A. 660 East Jefferson Street Tallahassee, FL 32301 Florida Bar No. 0140290

ARTICLE VII

Indemnification

The Corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE VIII Capital Stock

The aggregate number of shares which the Corporation is initially authorized to issue shall be 1,000 shares. Such shares shall be of a single class of common stock only, and shall have a par value of \$.01 per share.

ARTICLE IX

Incorporators

The name and address of the person signing these Articles is:

James J. McCahill 1700 Route 3 West Clifton, New Jersey 07013

IN WITNESS WHEREOF, the undersigned Incorporator has executed these

Articles of Incorporation this

day of

, 1999.

AMES J. MC CAHILL, Incorporator

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 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:

SERVICE STATION INSURANCE PROGRAM SERVICES OF FLO	ŌRIDĀ, IN	\mathbf{c}
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2. The name and address of the registered agent and office is:

Douglas A. Mang, Esquire Mang Law Firm, P.A. 660 East Jefferson Street Tallahassee, FL 32301

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: