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BUSINESS SERVICE SYSTEMS, PA		
Accounting and Tax Profession	onals	
6600 - 4th Street N., Suite 10 St. Petersburg, Florida 3370	01 2	
City/State/Zip	Phone #	

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### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. (Corporation Name)  2. (Corporation Name)  3. (Corporation Name)	(Document #)  5000030589760  (Document #)  *****70.00 ******70.00  (Document #)
4. (Corporation Name)  Walk in Pick up time  Mail out Will wait	(Document #)  Certified Copy
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment  Resignation of R.A., Officer/Director  Change of Registered Agent  Dissolution/Withdrawal  Merger  Certificate of Status  TALLED  FLORETARY  FLORETARY  OF STATE  AM II. 57
OTHER FILINGS  □ Annual Report □ Fictitious Name	REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other

**Examiner's Initials** 

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1999 DEC -2 AM 11: 57

#### ARTICLES OF INCORPORATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

OF

#### EXECUTIVE INSURANCE CO., INC.

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

#### Article I. NAME

The name of this corporation shall be Executive Insurance Co., Inc.

#### Article II. PLACE OF BUSINESS

The principal place of business of this corporation shall be 36279 U.S. Highway 19 North, Palm Harbor, FL 34684.

#### 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, county, territory or nation.

#### Article III. DURATION

This corporation shall exist perpetually.

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#### Article IV. CAPITAL STOCK

This corporation is authorized to issue 1000 shares of One Dollar (\$1.00) par value stock, which shall be designated "Common Shares".

#### Article V. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 36279 U.S. Highway 19, North, Palm Harbor, FL 34684, and the name of the initial registered agent of this corporation at that address is Medi Kaplani.

#### Article VI. INITIAL BOARD OF DIRECTORS

This corporation shall have one director initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one. The name and address of the initial director of this corporation is:

Medi Kaplani 36279 U.S. Highway 19 North Palm Harbor, FL 34684

#### Article VII. OFFICERS

The initial officers of this corporation and their offices shall be as follows:

PRESIDENT Medi Kaplani

VICE-PRESIDENT Hala I. Akl

SECRETARY Medi Kaplani

TREASURER Medi Kaplani

#### Article VIII. INCORPORATOR

The name and address of the person signing theses articles is:

Medi Kaplani 36279 U.S. Highway 19 North Palm Harbor, FL 34684

#### Article IX. AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these articles of incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

#### Article X. EFFECTIVE DATE

This corporation shall become effective upon the filing of these articles.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 30th day of November, 1999.

Medi Kaplam Incorporator

STATE OF FLORIDA

COUNTY OF PINELLAS

BEFORE ME, a notary public, authorized to take acknowledgments in the state and county set forth above, personally appeared Medikaplani, known to me and known by me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed those Articles of Incorporation as his free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid, this 30 to day of 1999.

NOTARY PUBLIC

MY COMMISSION EXPIRES: 6/2/2003

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## CERTIFICATE DESIGNATING SECRETARY OF STATE REGISTERED AGENT / REGISTERED OFFICEALLAHASSEE, FLORIDA

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 is Executive Insurance Co., Inc.
- 2. The name and address of the registered agent and office is:

Medi Kaplani 36279 U.S. Highway 19 North Palm Harbor, FL 34684

Signature

Title

President

Date

11. 3. 99

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATE 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

Date

11-30-99