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Florida Department of State  
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To: Division of Corporations  
 Fax Number : (850)617-6381

From: Account Name : ANTONIO ALONSO, PLLC.  
 Account Number : I20160000045  
 Phone : (305)606-0399  
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Email Address: \_\_\_\_\_ alonsoa@aapalaw.com \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
ESTATE PLANNING INSURANCE SOLUTIONS, LLC.**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

**ARTICLES OF ORGANIZATION OF  
ESTATE PLANNING INSURANCE SOLUTIONS, LLC.**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I -Name:**

The name of the Limited Liability Company is:

**ESTATE PLANNING INSURANCE SOLUTIONS, LLC.**

**ARTICLE II -Address:**

The initial mailing address and street address of the principal office of the Limited Liability Company is:

2000 Island Blvd., PH 8  
Aventura, FL 33160

**ARTICLE III -Registered Agent and Registered Office**

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

ANTONIO ALONSO PLLC  
121 Alhambra Plaza, Suite 1500  
Coral Gables, FL 33134

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**ARTICLE IV – Managers**

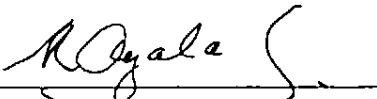
The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	<u>Name and Address</u>
Manager	Roberto Ayala 2000 Island Blvd., PH 8 Aventura, FL 33160
Manager	Maria del Pilar Ruiz 2000 Island Blvd., PH 8 Aventura, FL 33160

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledge them to be my act this 30 day of June, 2021.

  
Name: **Roberto Ayala**

(In accordance with Section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, F.S.)

  
Name: **Roberto Ayala**

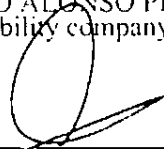
**STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT**

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 605, Florida Statutes.

(In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, F.S.)

Signature of Registered Agent

ANTONIO ALONSO PLLC, a Florida  
limited liability company

  
By: Antonio Alonso, its Manager

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