

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L22000413513  
FILED 8:00 AM  
September 22, 2022  
Sec. Of State  
amrivers

**Article I**

The name of the Limited Liability Company is:

ALL STATE CATASTROPHE LLC

**Article II**

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

707 SPORTSMAN PARK DR  
SEFFNER, FL. 33584

The mailing address of the Limited Liability Company is:

707 SPORTSMAN PARK DR  
SEFFNER, FL. 33584

**Article III**

The name and Florida street address of the registered agent is:

MICHAEL R BARD  
707 SPORTSMAN PARK DR  
SEFFNER, FL. 33584

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

Registered Agent Signature: MICHAEL BARD

### **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: MGR  
MICHAEL BARD  
707 SPORTSMAN PARK DR  
SEFFNER, FL. 33584

Title: AMBR  
ALEXANDER MALAVE  
18002 RICHMOND PLACE DR #3525  
TAMPA, FL. 33647

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### **Article V**

The effective date for this Limited Liability Company shall be:

09/21/2022

Signature of member or an authorized representative

Electronic Signature: MICHAEL BARD

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.