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To:

Division of Corporations

Fax Number

: (850)922-4003

From:

Account Name : FOWLER, WHITE, GILLEN, BOGGS, VILLAREAL & BANKER, P.A

Account Number: 075410001562 Phone: (813)228-7411

Fax Number : (813)228-9401

# LIMITED LIABILITY COMPANY

Owen & Associates Agency, LLC

Certificate of Status	O D
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#### ARTICLES OF ORGANIZATION

OF

### OWEN & ASSOCIATES AGENCY, LLC

The undersigned, an authorized natural person, for the purpose of forming a limited ability company, under the provisions and subject to the requirements of the Florida Limited Liability Company Act, hereby certifies that:

FIRST: The name of the limited liability company (hereinafter called the "limited iability company") is Owen & Associates Agency, LLC.

SECOND: The mailing address and the street address of the principal office of the imited liability company are 17717 Simms Road, Odessa, Florida 33556.

THIRD: The name and street address of the limited liability company's initial egistered agent for service of process in the State of Florida are Fowler, White, Gillen, Boggs, 'illareal and Banker, P.A., 501 East Kennedy Boulevard, Suite 1700, Tampa, Florida 33602, 'Attention: R. Alan Higbee, Esq.

FOURTH: The limited liability company is to be a manager-managed company.

Executed on May 18, 2000.

FOWLER, WHITE, GILLEN, BOGGS, VILLAREAL AND BANKER, P.A., as Authorized Representative

R. Alan Higbee, on behalf of the Authorized Representative

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## ACCEPTANCE BY REGISTERED AGENT

Having been appointed the registered agent of Owen & Associates Agency, LLC, Fowler, White, Gillen, Boggs, Villareal and Banker, P.A. accepts such appointment, agrees to act in such capacity and accepts the obligations proposed by Florida Statutes Section 608.415 and is herewith simultaneously designated as registered agent.

Executed this 18th day of May, 2000.

R. Alan Higbee for Fowler, White, Gillen,

Boggs, Villareal and Banker, P.A.,

as Registered Agent

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