

L00000007737

June 15, 2000

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

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-06/19/00--01003--021
****155.00 ****155.00

To Whom It May Concern:

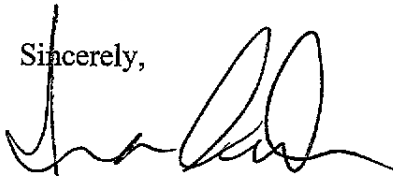
Enclosed please find Articles of Organization for Florida Limited Liability Company and attached check in the amount of \$155.00 for Filing Fee for Articles of Organization, Designation of Registered Agent, and a Certified Copy. This is filed for the following organization:

Kerker Casualty, L.L.C.
5900 North Andrews Avenue
Suite 200
Ft. Lauderdale, FL 33309

FILED
00 JUN 30 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Please send a letter of acknowledgement upon registration to this address. Thank you for your assistance.

Sincerely,



Ira P. Kerker
Registered Agent

IPK/tmc

Enclosure

100-7737

Name	IPK 6-30
Address	IPK 6-30
Duration	IPK 6-30
Expiration	IPK 6-30
Updater	IPK 6-30
Underwriter	IPK 6-30
Verifier	IPK 6-30
Approval	IPK 6-30
Signature	IPK 6-30



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 22, 2000

IRA KERKER
5900 NORTH ANDREWS AVENUE, SUITE 200
FORT LAUDERDALE, FL 33309

SUBJECT: KERKER CASUALTY, L.L.C.
Ref. Number: W00000015929

We have received your document for KERKER CASUALTY, L.L.C. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return 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) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 800A00035447

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00 JUN 30 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Kerker Casualty, L.L.C.

ARTICLE II - Address:

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

5900 North Andrews Avenue
Suite 200
Ft. Lauderdale, FL 33309

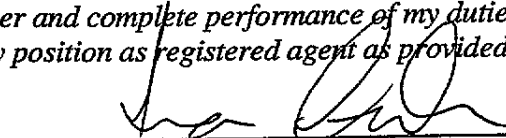
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Ira P. Kerker
Name
5900 North Andrews Avenue, Suite 200
Florida street address (P.O. Box NOT acceptable)
Ft. Lauderdale FL 33309
City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 as provided for in Chapter 608, F.S..



Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

IRA KERKER

Typed or printed name of signee

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)
\$ 5.00 Certificate of Status (OPTIONAL)