

October 07, 2000

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

To whom this may concern:,

My name is Ronald A. Conrad, address 7900 South Park Place, Orlando Florida 32819. My daytime telephone number is (407) 909-1935 or (407) 246-8208. Please respond to this request for incorporation as a limited liability corporation as soon as possible as timing is extremely important for me at this time. I very much appreciate your attention.

Sincerely,

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Royal a. Canal

Ronald A. Conrad

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability	y Company is: CONDAD ASSURANCE AND ADVISOR?
·	SENTLES LIC
	Succession and
ARTICLE II - Address:	-
The mailing address and street ad	dress of the principal office of the Limited Liability Company is:
7900 SOUTH	PROK PLACE
OPLANDO, FLO	PROK PLACE OREDA 32819
, ,	
ARTICLE III - Registered Agen	nt, Registered Office, & Registered Agent's Signature:
The name and the Florida street a	ddress of the registered agent are:
	PONALO A. CONDAO
	Name
	non-series on the series of th
	ide street address (D.C. D. NOT)
	onano, FL 32819 5 UT
	City, State, and Zip
registered agent and agree to act statutes relating to the proper and	agent and to accept service of process for the above stated limited ignated in this certificate, I hereby accept the appointment as in this capacity. I further agree to comply with the provisions of all complete performance of my duties, and I am familiar with and ion as registered agent as provided for in Chapter 608, F.S
	Registered Agent's Signature
	Registered Agent's Signature
therefore, a manager - managed of	any is to be managed by one manager or more managers and is, company.
(All addition	nal article must be added if an effective date is requested) nald A. Con (ad)
	of a member or an authorized representative of a member.
(In accordar of this docu	nce with section 608.408(3), Florida Statutes, the execution ament constitutes an affirmation under the penalties of perjury ts stated herein are true.)
	PRONALD A. CONRAD
	Typed or printed name of signee
\$ 100.00 \$ 25.00	FILING FEES: Filing Fee for Articles of Organization Designation of Registered Agent \$ 30.00 Certified Copy.) \$ 5.00 Certificate of Status (OPTIONAL)