

✓ L00000015169 ✓

Thomas H.G. Holcombe
1934 Timberline Dr.
Naples, FL 34109

November 24, 2000

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 DEC -7 PM 3:45

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***160.00 ***160.00

Re: Service First Insurance Professionals, LLC

Dear FL Dept. of State:

Please register and forward a certified copy and certificate of status. Thank you.

Sincerely,



Thomas H.G. Holcombe

registered agent

po. add.

1122
6003-28235

Name	
Availability	
Document Examiner	elt
Updater	
Updater Verifier	
Acknowledgement	
N. P. Verifier	

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

November 30, 2000

THOMAS H.G. HOLCOMBE
1934 TIMBERLINE DR.
NAPLES, FL 34109

SUBJECT: SERVICE FIRST INSURANCE PROFESSIONALS, LLC
Ref. Number: W00000028235

We have received your document for SERVICE FIRST INSURANCE PROFESSIONALS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

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) 487-6911.

Brenda Tadlock
Sr. Corporate Section Administrator

Letter Number: 900A00060745

ARTICLES OF ORGANIZATION
OF
SERVICE FIRST INSURANCE PROFESSIONALS, LLC

ARTICLE I

NAME

Section 1. Name.

The name of the company is:

SERVICE FIRST INSURANCE PROFESSIONALS, LLC

ARTICLE II

MAILING & STREET ADDRESS

The mailing address shall be: 1934 Timberline Drive, Naples, Florida, 34109

The street address is 8840 Terrene Court Building B, Bonita Springs, FL 34134

ARTICLE III

REGISTERED AGENT

Section 1. Offices.

The registered office shall be: 1934 Timberline Dr., in the City of Naples, County of Collier, State of Florida (hereinafter, the "State"). The organization may also have offices at such other places both within and without the State, as the managers may from time to time determine or the business of the organization may require.

Section 2. Agent.

The registered agent shall be Thomas H.G. Holcombe.

ARTICLE IV

NATURE OF BUSINESS

Section 1. Structure.

This Limited Liability Company shall be a manager-managed company.

Section 2. Nature.

A. To transact any and all lawful business for which organizations may be organized under Florida General Law.

B. Property management.

C. To do such other things as are incidental to the forgoing or necessary or desirable in order to accomplish the foregoing.

ARTICLE V

MANAGERS/MEMBERS

Section 1. Number.

There shall be two (2) managers/members of the Organization.

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DIVISION OF CORPORATIONS

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Section 2. Designation.

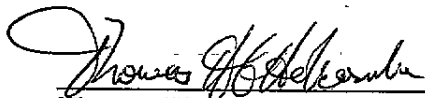
The two managers/members shall be:

Thomas H.G. Holcombe
1934 Timberline Dr.
Naples, FL 34109

and


Michael F. Ryba
2169 45th Terrace
Naples, FL 34116

Managers/ Members


Thomas H.G. Holcombe 11/22/00
Date


Michael F. Ryba 11/21/00
Date

Registered Agent Acceptance: 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 am familiar with and accept the obligations of my position as registered agent as provide for in Chapter 608, F.S.


Thomas H.G. Holcombe 11/22/00
Date