Florida Department of State

Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet.

Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000032927 5)))

Note: DO NOT hit the REFRESH/RELPAD button on your browser from this page. Doing so will generate another cover sheet.

PR-3 PM 2:51

To:

Division of Corporations

Fax Number : (8

: (850)922-4003

From:

Account Name : DANIEL HICKS, P.A.

Account Number: 075061003325 Phone: (352)351-3353

Fax Number : (352)351-8054

AL |

#### LIMITED LIABILITY COMPANY

UNSTEPHEN BIRD INSURANCE AGENCY, LLC

Certificate of Status	0
Certified Copy	0
Page Count .	06
Estimated Charge	\$125.00

PRECEIVED

OI APR -3 PH 12: 46

ALCALISSEE PLONE
THEIR

Apr-3-01 10:11;

Page 2



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 3, 2001

DANIEL HICKS, P.A.

SUBJECT: STEPHEN BIRD INSURANCE AGENCY, LLC

REF: W01000007414

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to you.

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) 487-6967.

Michelle Hodges Document Specialist

FAX Aud. #: H01000032927 Letter Number: 701A00019673

# ARTICLES OF ORGANIZATION OF STEPHEN BIRD INSURANCE AGENCY, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, hereby make, acknowledge, and file the following Articles of Organization.

#### ARTICLE I

The name of the limited liability company shall be STEPHEN BIRD INSURANCE AGENCY, LLC ("Company"). The principal office and mailing address of the Company in Storida shall be 516 S.E. 17<sup>th</sup> Street, Ocala, Florida 34471.

#### ARTICLE II

The Company shall commence its existence on the date these Articles of Organization are filed with the Florida Department of State. The Company's existence shall be perpetual, unless the Company is earlier dissolved as provided in these Articles of Organization.

## ARTICLE III PURPOSES AND POWERS

The general purpose for which the Company is prganized is to conduct the business of insurance and to transact any lawful business for which a limited liability company may be organized under the laws of the State of Florida. The Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

#### ARTICLE IV REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the Company in the State of Florida is Daniel Hicks, 421 South Pine Avenue, Ocala, Florida 34474-4175.

H01000032927 5 )))

(((

FILEL

#### ARTICLE V | CAPITAL CONTRIBUTIONS

The members of the Company shall contribute to the capital of the Company the cash or property set forth as follows:

NAME

CAPITAL CONTRIBUTION

% Membership Units

Stephen Bird

\$100.00

100%

100

#### ARTICLE VI ADDITIONAL CAPITAL CONTRIBUTIONS

Each member shall make additional capital contributions to the Company as such times and in such amounts as may be provided in the regulations adopted by the members or, in lieu thereof, only upon the unanimous consent of all the members.

## ARTICLE VII ADMISSION OF NEW MEMBERS (TRANSFERABILITY OF INTERESTS)

No additional members shall be admitted to the Company except with the unanimous written consent of all the members of the Company and upon such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the Company as set forth in the regulations of the Company, but transferee shall have no right to participate in the management of the business and affairs of the Company or become a member unless all the other members of the Company other than the member proposing to dispose of his or her interest approve of the proposed transfer by unanimous written consent.

#### ARTICLE VIII : TERMINATION OF EXISTENCE (CONTINUITY OF LIFE)

The company shall be dissolved upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or manager, or upon the occurrence of any other event that terminates the continued membership of a member of the Company, unless the business of the Company is continued by the consent of a majority in interest of the remaining members, provided there is at least one (1) remaining member.

#### ARTICLE IX | MANAGEMENT (MANAGEMENT BY MEMBERS)

The Company shall be managed by a manager or managers in accordance with regulations adopted by the members for the management of the business and affairs of the Company. These regulations may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The name and address of the initial manager of the Company is:

NAME

AND ADDRESS

Stephen Bird

516 S.E. 17 Street, Ocala, Florida 3447

IN WITNESS WHEREOF, the undersigned organizers have made and subscribed these Articles of Organization at Ocala, Florida, for the foregoing uses and purposes this 2<sup>nd</sup> day of April, 2001.

Daniel Hicks, Incorporator/Organizer

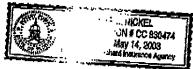
STATE OF FLORIDA COUNTY OF MARION

Before me, personally appeared, Daniel Hicks, to me well known and known to me to be the person described in and who executed the foregoing Articles of Organization and acknowledged to and before me that he executed said instrument for the purposes therein expressed, and that he is personally known to me.

WITNESS my hand and official seal this

day of April, 2001.

DEBRA S. NICKE:
MY COMMISSION NICKE:
EXPERIMENTAL STATEMENT
Bondad To A Commission North Action North Action



Votary Public. State of Florida

((( )))

- 3 -

H01000032927 5

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name and address of the limited liability company is STEPHEN BIRD INSURANCE AGENCY, LLC, 516 S.E. 17th Street, Ocala, Florida 34471.
- 2. The name and address of the registered agent and office is: Daniel Hicks, 421 South Pine Avenue, Ocala, Florida 34474.

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.

Daniel Hicks

April 2, 2001

OI APR -3 PM 2:51
SECRETARY OF JATE
TALLAHASSEE, FLORIDA

#### ACCEPTANCE OF REGISTERED AGENT

I, the undersigned person, having been named as registered agent and to accept services of process for the above-stated limited liability company at the place designated in this statement, 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 obligation of my position as registered agent.

Dated, this Old day of April, 2001.

Daniel Hicks

PR -3 PM 2:51