Electronic Articles of Organization For Florida Limited Liability Company

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FILED
April 29, 2002
Sec. Of State

Article I

The name of the Limited Liability Company is:

APPLE INSURANCE MALL OF JACKSONVILLE, LLC

Article II

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

5201 PARK BOULEVARD
PINELLAS, FL. US 33781

The mailing address of the Limited Liability Company is:

5201 PARK BOULEVARD
PINELLAS, FL. US 33781

Article III

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

THE INSURANCE CENTER, INC.
4605 S. TAMIAMI TRAIL
SARASOTA, FL. US 34231

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.

Registered Agent Signature: WILLIAM G. CALLAGHAN, SENIOR VP

Signature of member or an authorized representative of a member

Signature: WILLIAM G. CALLAGHAN, SENIOR VP