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Florida Department of State  
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## To:

Division of Corporations  
Fax Number : (850)205-0383

## From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305)634-3694  
Fax Number : (305)633-9696

**LIMITED LIABILITY COMPANY****southernmost underwriters, llc**

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J. BRYAN MAY 23 2003

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④

This Instrument Prepared by:  
JOHN P. MAAS, ESQUIRE  
44 N.E. 16 Street  
Homestead, Florida 33030  
Florida Bar No.: 435910

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ARTICLES OF ORGANIZATION  
OF  
SOUTHERNMOST UNDERWRITERS, L.L.C.

ARTICLE I:

The name of this limited liability company shall be: SOUTHERNMOST UNDERWRITERS, L.L.C., a Florida limited liability company.

ARTICLE II:

The mailing address and street address of the principal office of the limited liability company shall be as follows:

Southernmost Underwriters, L.L.C.  
1008 N.W. 1<sup>st</sup> Avenue  
Homestead, Florida 33030

ARTICLE III:

The name of the registered agent for Southernmost Underwriters, L.L.C. is as follows:

Anthony Hazard  
1008 NW. 1<sup>st</sup> Avenue  
Homestead, Florida 33030

ARTICLE IV:

This limited liability company shall be managed by its members who are set forth below.

ARTICLE V:

The initial members of Southernmost Underwriters, L.L.C. are as follows:

Anthony Hazard  
1008 N.W. 1<sup>st</sup> Avenue  
Homestead, Florida 33030

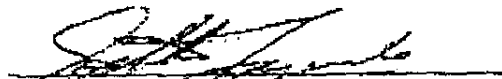
Benjamin Trujillo  
1008 N.W. 1<sup>st</sup> Avenue  
Homestead, Florida 33030

Esteban Fagundo  
1008 N.W. 1<sup>st</sup> Avenue  
Homestead, Florida 33030

DATED this 22<sup>nd</sup> day of May, 2003.

  
ANTHONY HAZARD

  
BENJAMIN TRUJILLO

  
ESTEBAN FAGUNDO

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TALLAHASSEE, FLORIDA


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CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE  
OF  
SOUTHERNMOST UNDERWRITERS, L.L.C.

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TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THE ARTICLES OF ORGANIZATION, 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.

DATED this 22<sup>nd</sup> day of May, 2003.

  
ANTHONY HAZARD  
Registered Agent  
1008 N.W. 1<sup>st</sup> Avenue  
Homestead, Florida 33030