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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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June 27, 2003

Corporations Division Secretary of State Florida Department of State R. A. Gray Building 500 S. Bronough Tallahassee, FL 32399-0250

Re: Articles of Organization

Dear Sir/Madam:

Please find enclosed a check in the amount of \$165.00 made payable to the Florida Secretary of State's Office as payment for certified Articles of Organization for Employers Premier Holdings, LLC.

If you need further information, do not hesitate to contact Melinda Green via telephone at 954-974 3682 or via e-mail at MER016@AOL.COM. Please return certified copies to Melinda Green, 6463 Amberjack Terrace, Margate, FL 33063.

Sincerely,

Melinda Green, Paralegal

TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations | |
|---|--|
| • | |
| SUBJECT: Employers Premier Holdings, | LLC |
| (Name of Limited Lie | ability Company) |
| | |
| The enclosed Articles of Organization and fee(s) a | re submitted for filing. |
| Please return all correspondence concerning this m | natter to the following: |
| | |
| Brian S. Fischer | |
| (Name of Person) | |
| | |
| | |
| (Firm/Company) | |
| | |
| | |
| 2290 10th Avenue North, Suite 302 | |
| (Address) | |
| Lakeworth, FL 33461 | |
| (City/State and Zip Code) | |
| | |
| For further information concerning this matter, ple | ase call: |
| | |
| Brian S. Fischer at (| 561 963-7350 |
| (Name of Person) | (Area Code & Daytime Telephone Number) |
| | |
| STREET ADDRESS: | MAILING ADDRESS: |
| Registration Section Division of Corporations | Registration Section |
| 409 E. Gaines Street | Division of Corporations P.O. Box 6327 |
| Tallahassee, Florida 32399 | Tallahassee, Florida 32314 |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Employers Premier Holdings, LLC

ARTICLE II - Address:

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

| Principal Office Add | ress: | Mailing Address | <u>S</u> | |
|----------------------|---------------------------|----------------------------|------------------|--|
| 2290 10th Avenue Nor | th | Same | | |
| Suite 302 | | | | |
| Lakeworth, FL 33461 | | | | |
| ū | stered Agent, Register | ed Office, & Registered Ag | ent's Signature: | O. DIVIS |
| | Brian S. Fischer | | | Sign |
| | Nam | c | • . = ' | SERVED SOLUTION TO THE |
| | 2290 10th Avenu | ue North, Suite 302 | | 27. |
| | Florida street address (P | O. Box NOT acceptable) | • | H IO: |
| | Lakeworth | FL 33461 | | |
| _ | City, State | , and Zip | | 80 10% 10% |

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 as provided for in Chapter 608, F.S..

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

| MGR | Brian S. Fischer | |
|-------------|--|---------------------------------------|
| | 2290 10th Avenue, Suite 302 | |
| | Lakeworth, FL 33461 | |
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| | —————————————————————————————————————— | |

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

S. TISCHE

Filing Fees: \$100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Page 2 of 2