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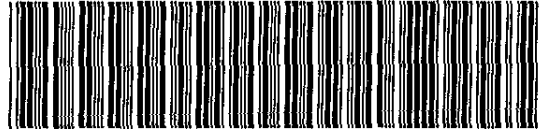
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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7/14
[Signature]

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ATTORNEYS AT LAW

1411 EDGEWATER DRIVE, SUITE 100
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OF COUNSEL: PHILIP A. THARP
1939-2003

July 8, 2003

Sent Via Overnight Mail

Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Signature Insurance Agency, L.L.C.

To Whom It May Concern:

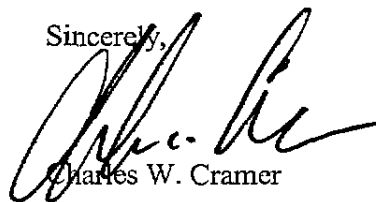
I am enclosing herewith the following items regarding the filing of the Articles of Organization of the above referenced Limited Liability Company, to wit:

1. Original and one copy of Articles of Organization;
3. Registered Agent Certificate; and
4. A check payable to the Secretary of State in the amount of \$155.00.

Please file these documents on our behalf and remit the Certificate to the undersigned.

Thank you in advance for your cooperation.

Sincerely,



Charles W. Cramer

CWC/ksw

Enclosures

Cc: Signature Insurance Agency, L.L.C. (w/enc.)

**ARTICLES OF ORGANIZATION
OF
SIGNATURE INSURANCE AGENCY, L.L.C.**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned members of this Limited Liability Company pursuant to Chapter 608 of the Florida Statutes, hereby forms a Limited Liability Company for profit under the laws of the State of Florida and adopts the following Articles of Organization for such Limited Liability Company:

ARTICLE I: NAME

The name of this Limited Liability Company shall be Signature Insurance Agency, L.L.C.

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of this Limited Liability Company shall be located 1411 Edgewater Drive, Suite 103, Orlando, Florida, 32804.

ARTICLE III: DURATION

The Limited Liability Company's period of duration is perpetual.

**ARTICLE IV: INITIAL REGISTERED
OFFICE AND REGISTERED AGENT**

The initial street address of the registered office of this Limited Liability Company in the State of Florida shall be 1411 Edgewater Drive, Suite 100, Orlando, Florida, 32804. The name of the initial registered agent of this Limited Liability Company at that address is Charles W. Cramer.

ARTICLE V: MANAGEMENT

The members or their appointees shall manage this Limited Liability Company.

ARTICLE VI: ADDITIONAL MEMBERS

New members of this Limited Liability Company may only be admitted by the unanimous

consent of the existing members. A member of this Limited Liability Company is prohibited from transferring his/her interest in this Limited Liability Company to any third parties, unless the other members unanimously agree to the transfer.

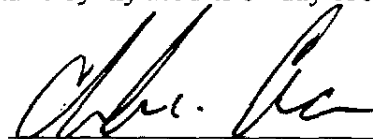
ARTICLE VII: DISSOLUTION

Unless the existing members of this Limited Liability Company unanimously agree, upon the death, insanity, bankruptcy, retirement, resignation or expulsion of any member this Limited Liability Company is to be dissolved.

ARTICLE VIII: LIMITATION ON AGENCY AUTHORITY OF MEMBERS

Pursuant to section 608.4235 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of the members and acknowledged them to by my act this 8th day of July, 2003.



Charles W. Cramer, Esq.

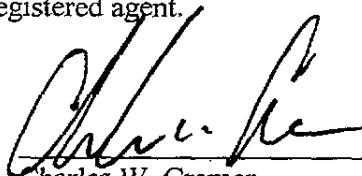
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 908.415 or 608.507, of the 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 of the Limited Liability Company is Signature Insurance Agency, L.L.C.
2. The name and address of the registered agent and office is

Charles W. Cramer, Esq.
1411 Edgewater Drive
Suite 100
Orlando, Florida 32804

Having been named as registered agent, and to accept service of process for the above stated Limited Liability Company at the place designated above, I hereby accept such designation and agree to act in such capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties as registered agent. I am familiar with, and accept the duties and obligations of my position as registered agent.



Charles W. Cramer
Registered Agent

Date: July 8, 2003

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SECRETARY OF
TALLAHASSEE, FLORIDA