

L03000035561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

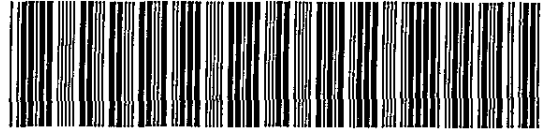
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300023033423

09/15/03--01030--016 **160.00

L29/18

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 SEP 15 PM 3:57

3p

LAW OFFICES
JAMES M. SCHIFF, P.A.
9130 SOUTH DADELAND BOULEVARD
MIAMI, FLORIDA 33156

TWO DATRAN CENTER
SUITE 1609

TELEPHONE (305) 670-5599
TELEFAX (305) 670-3319

September 12, 2003

VIA FEDERAL EXPRESS

Secretary of State
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32301

Re: Florida Risk Management Group, LLC
Our File No. 03-263

Dear Sirs:

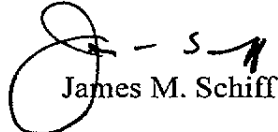
You will find enclosed herewith please find (i) Articles of Organization for Florida Risk Management Group, LLC and Statement Accepting Appointment as Registered Agent, together with our check in the amount of \$160.00 payable to the Florida Department of State for the following:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy
\$ 5.00 Certificate of Status
\$160.00 Total

Please return a certified copy of the Articles to our office as soon as possible in the enclosed, self-addressed stamped envelope we have provided.

Should you have any questions or if you are unable to process these Articles of Organization, please contact this office immediately. Thank you for your cooperation.

Sincerely,


James M. Schiff

JMS:mdr
Enclosure

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 SEP 15 PM 3:03

**ARTICLES OF ORGANIZATION OF
FLORIDA RISK MANAGEMENT GROUP, LLC**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certify that:

ARTICLE I — Name:

The name of the limited liability company (hereinafter referred to as the "Company") is "Florida Risk Management Group, LLC."

ARTICLE II — Address:

The mailing address and street address of the principal office of the Company is: 9350 South Dixie Highway, Suite 930, Miami, Florida 33156.

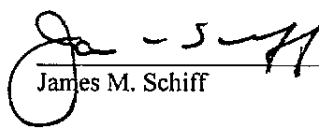
ARTICLE III — Registered Agent:

The name and the Florida street address of the initial registered agent is: James M. Schiff, 9130 South Dadeland Boulevard, Suite 1609, Miami, Florida 33156.

ARTICLE IV — Management:

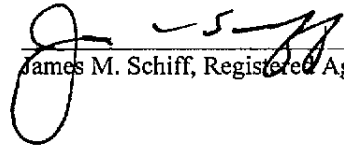
The Company is to be managed by the members.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 12 day of September, 2003.


James M. Schiff

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.


James M. Schiff, Registered Agent

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 SEP 15 PM 2:11