

LD4000012761

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

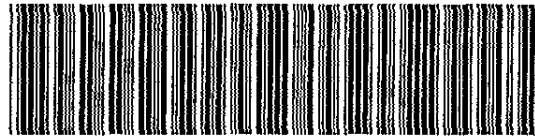
☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



800028143278

02/06/04--01049--002 **160.00

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DIVISION OF CORPORATIONS
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| W. P. Verifier | DCC |
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Roger D. Wiegley
Attorney at Law
325 Morrow Road
Englewood, NJ 07631

February 3, 2004

State of Florida
Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Tel. (850) 245-6051

Re: SRS Underwriters LLC

Dear Madam or Sir:

I would like to submit for filing the enclosed Articles of Organization for a Florida Limited Liability Company with the name SRS Underwriters LLC.

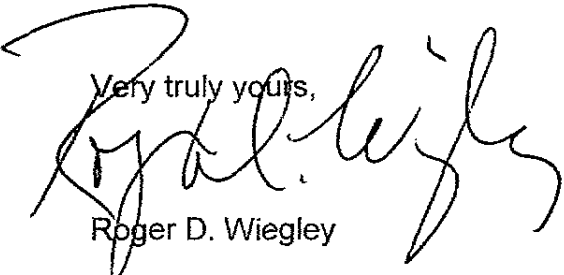
I am enclosing a check in the amount of \$160.00 made payable to "Florida Department of State" to cover the following:

| | |
|----------------------------------|----------|
| Filing Fee: | \$100.00 |
| Designation of Registered Agent: | \$25.00 |
| Certified Copy: | \$30.00 |
| Certificate of Status: | \$5.00 |

Please send the certified copy and certificate of status to me at the above address.

Thank you very much. If you have any question, you can reach me during the day at 212-538-8541.

Very truly yours,


Roger D. Wiegley

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

SRS Underwriters LLC

ARTICLE II - Address:

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

Principal Office Address:

17 South Magnolia Avenue

Orlando, FL 32801

Mailing Address:

17 South Magnolia Avenue

Orlando, FL 32801

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

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

J. Brady Young

Name

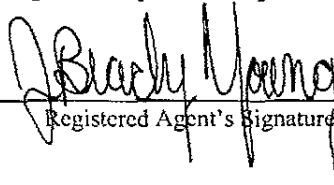
43B Sandy Cove Road

Florida street address (P.O. Box **NOT** acceptable)

Sarasota, FLORIDA 34242-1618

City, State, and Zip

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, Florida Statutes..



Registered Agent's Signature

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Strategic Risk Solutions, Inc.

Reservoir Place, 1601 Trapelo Road

Waltham, MA 02451

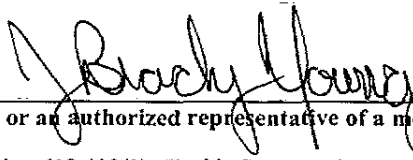
(Use attachment if necessary)

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NOTE: An additional article must be added if an effective date is requested.

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.)

J. Brady Young

Typed or printed name of signee

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)