# Electronic Articles of Organization For Florida Limited Liability Company

L05000000787 FILED 8:00 AM January 04, 2005 Sec. Of State mhodges

#### **Article I**

The name of the Limited Liability Company is:

COMPREHENSIVE INSURANCE CONSULTANTS, LLC

#### **Article II**

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

11249 REGATTA LANE WELLINGTON, FL. 33467

The mailing address of the Limited Liability Company is:

11249 REGATTA LANE WELLINGTON, FL. 33467

#### **Article III**

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

## **Article IV**

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

CLAUDIO RIVERA 2801 PONCE DE LEON STE. 1100 CORAL GABLES, FL. 33134

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.

Registered Agent Signature: CLAUDIO RIVERA

# **Article V**

The name and address of managing members/managers are:

Title: MGRM LAZARO GARCIA 11249 REGATTA LANE WELLINGTON, FL. 33467

Title: MGRM ELIZABETH GARCIA 11249 REGATTA LANE WELLINGTON, FL. 33467 L05000000787 FILED 8:00 AM January 04, 2005 Sec. Of State mhodges

## **Article VI**

The effective date for this Limited Liability Company shall be:

01/03/2005

Signature of member or an authorized representative of a member

Signature: LAZARO GARCIA