

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L05000008882
FILED 8:00 AM
January 27, 2005
Sec. Of State
mhodges

Article I

The name of the Limited Liability Company is:
SCALOGNA INSURANCE AGENCY LLC

Article II

The street address of the principal office of the Limited Liability Company is:
425 9TH STREET SOUTH
NAPLES, FL. 34102

The mailing address of the Limited Liability Company is:
425 9TH STREET SOUTH
NAPLES, FL. 34102

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:
JOSEPH SCALOGNA
6031 WAXMYRTLE WAY
NAPLES, FL. 34109

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: JOSEPH SCALOGNA

Article V

The name and address of managing members/managers are:

Title: MGR
JOSEPH SCALOGNA
6031 WAXMYRTLE WAY
NAPLES, FL. 34109

Title: MGR
GREGORY L SCALOGNA
173 WILLOUGHBY DRIVE
NAPLES, FL. 34110

Signature of member or an authorized representative of a member

Signature: JOSEPH SCALOGNA

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