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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 318447 7199111

AUTHORIZATION :

Patricia Pizuto

COST LIMIT : \$ 155.00

ORDER DATE : April 15, 2005

ORDER TIME : 3:28 PM

ORDER NO. : 318447-005

CUSTOMER NO: 7199111

CUSTOMER: Mr. Scott E. Hodes
Seth E. Ellis, P.a.

Suite 190
2385 Executive Center Drive
Boca Raton, FL 33431

DOMESTIC FILING

NAME: A.M.T. INSURANCE GROUP, LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - EXT. 2935

EXAMINER'S INITIALS: _____

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CORPORATIONS
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
A.M.T. INSURANCE GROUP, LLC**

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OFFICE OF THE CLERK
TALLAHASSEE, FLORIDA

**ARTICLE I
Name**

The name of the Limited Liability Company is **A.M.T. INSURANCE GROUP, LLC.**

**ARTICLE II
Address**

EFFECTIVE DATE
04/15/05

The mailing address and street address of the principal office of the Limited Liability Company is 18671 Collins Avenue, Unit 3102, Sunny Isles Beach, FL 33160.

**ARTICLE III
Duration**

This period of duration for the Limited Liability Company shall be: **PERPETUAL.**

**ARTICLE IV
Purpose**

This Limited Liability Company is organized for the purpose of transacting any or all lawful business for which corporations may be incorporated under the Florida Limited Liability Company Act.

**ARTICLE V
Registered Agent**

The street address of the initial registered office of the Limited Liability Company shall be **SETH E. ELLIS, P.A., 2385 Executive Center Drive, Suite 190, Boca Raton, FL 33431**, and the name of the initial registered agent of the Limited Liability Company at that address is Scott E. Hodes, Esq.

ARTICLE VI

Management

The Limited Liability Company is to be managed by a member and the name and address of the member are:

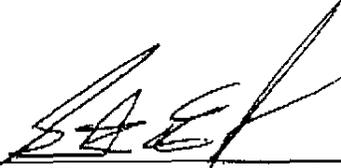
Alan Michael Topchik
18671 Collins Avenue, Unit 3102
Sunny Isles Beach, FL 33160

ARTICLE VII

Effective Date

Pursuant to Florida Statute Section 608.409, the Limited Liability Company's existence shall be effective as of April 15, 2005, which is within five (5) business days prior to the date these Articles of Organization are filed with the Department of State.

The undersigned authorized representatives of the members of A.M.T. INSURANCE GROUP, LLC hereby execute these articles of organization on this 15 day of April, 2005.



SCOTT E. HODES, ESQ.,
authorized representative by Power of Attorney

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JULIE GIBBS
TALLAHASSEE, FLORIDA

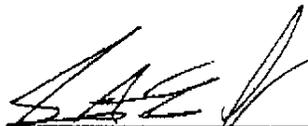
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATED A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the Limited Liability Company is **A.M.T. INSURANCE GROUP, LLC.**
- 2. The name and the Florida street address of the registered agent and office are:

Scott E. Hodes, Esq.
SETH E. ELLIS, P.A.,
 2385 Executive Center Drive, Suite 190
 Boca Raton, Fl 33431

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, F.S.



SCOTT E. HODES, ESQ.

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 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA