

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

L05000062731  
FILED 8:00 AM  
June 24, 2005  
Sec. Of State  
jmerrick

**Article I**

The name of the Limited Liability Company is:  
FLORIDA ALL INSURANCE, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
2201 NE 2 AVE.  
DELRAY BEACH, FL. 33444

The mailing address of the Limited Liability Company is:  
575 DAVIS ROAD  
DELRAY BEACH, FL. 33445

**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:  
DANNY MESIDORT  
575 DAVIS ROAD  
DELRAY BEACH, FL. 33445

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: DANNY MESIDORT

### **Article V**

The name and address of managing members/managers are:

Title: MGR  
DANNY MESIDORT  
575 DAVIS ROAD  
DELRAY BEACH, FL. 33445

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### **Article VI**

The effective date for this Limited Liability Company shall be:

06/23/2005

Signature of member or an authorized representative of a member

Signature: DANNY MESIDORT