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Account Name	: RUDEN, MCCLOSKY, SMITH, A	SCHUSTER & RUSSELL, P.A. 0
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LIMITED LIABILITY COMPANY

CKP Insurance LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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ARTICLES OF ORGANIZATION OF CKP INSURANCE LLC a Florida Limited Liability Company

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida do set forth the following:

I. <u>NAME</u>. The name of the limited liability company iCKP INSURANCE LLC (the "Company").

2. <u>MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE</u> The mailing and street address of the principal office of the Company is 23173 Boca Club Colony Circle Boca Raton, FL 33433.

3. <u>REGISTERED AGENT</u>. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization are: Kevin Rader, 23173 Boca Club Colony Circle Boca Raton, FL 33433.

The undersigned has executed these Articles of Organization on the 5 day of July, 2005.

an Bv:

Kevin Rader, Authorized Person



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Jul-05-2005 04:26pm _ From-RUDEN MCCLOSKY 17 FL ST

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CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liablity company is: CKP INSURANCE LLC.

2. The name and address of the registered agent and office are:

Kevin Rader 23173 Boca Club Colony Circle Boca Raton, FL 33433

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 its 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.

Kevin Rader, Registered Agent

550205 Date:

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