# Electronic Articles of Organization For Florida Limited Liability Company

L05000099227 FILED 8:00 AM October 10, 2005 Sec. Of State jsadler

## **Article I**

The name of the Limited Liability Company is: COMMUNITY INSURANCE GROUP, LLC

### **Article II**

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

28801 SW 157TH AVE 305 HOMESTEAD, FL. US 33033

The mailing address of the Limited Liability Company is:

28801 SW 157TH AVE 305 HOMESTEAD, FL. US 33033

#### **Article III**

The purpose for which this Limited Liability Company is organized is: INSURANCE BROKERAGE FIRM

#### **Article IV**

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

WALTER JENKINS III 1436 NE 40TH RD HOMESTEAD, FL. 33033

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: WALTER JENKINS III

## Article V

The name and address of managing members/managers are:

Title: MGRM DOUGLAS P HENRY 1436 NE 40TH RD HOMESTEAD, FL. 33033

Title: MGRM WALTER JENKINS III 1436 NE 40TH RD HOMESTEAD, FL. 33033 US

Title: MGRM DTRT INSURANCE 2400 E COMMERCIAL BLVD SUITE 825 FORT LAUDERDALE, FL. 33308 US

## **Article VI**

The effective date for this Limited Liability Company shall be: 11/01/2005

Signature of member or an authorized representative of a member Signature: DOUGLAS P HENRY

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