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Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (305)672-0686
Fax Number : (305)672-9110

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DIVISION OF CORPORATION

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Comprehensive Insurance Group II, LLC

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ARTICLES OF ORGANIZATION

Article I. Name

The name of this Florida limited liability company is:
Comprehensive Insurance Group II, LLC

Article II. Address

The Company's street and mailing address is:
Comprehensive Insurance Group II, LLC
636 US Highway 1
205
North Palm Beach FL 33408

Article III. Registered Agent

The name and street address of the Company's registered agent is:

Michael A. Lampert
1655 Palm Beach Lakes Blvd.
Suite 900
West Palm Beach FL 33401

Article IV. Transferability of Membership Interests

No members shall have the right to assign their membership interests in the Company without the written agreement of all of the membership interests, unless otherwise provided in the Company's Operating Agreement. If the assignment is not approved by all of the membership interests, the assignee shall have no right to become a member, to participate in the management of the Company, or to exercise any other rights or powers of a member. The assignee shall merely be entitled to receive the share of profits and other distributions and the allocation of income, gain, loss deduction, credit or similar item to which the assignor was entitled, to the extent assigned.

Michael A. Lampert | FL Bar Member 382469
Michael A. Lampert, P.A.
1655 Palm Beach Lakes Blvd.
Suite 900
West Palm Beach FL 33401
561-689-9407

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Article V. Distribution of Profits

Unless otherwise provided in the Company's Operating Agreement, there shall not be any distribution of profits unless each separate distribution is approved by the affirmative vote of members who own more than 50% of the voting interest in the Company. The voting members shall have complete discretion on when and if to approve any distribution of profits.

Article VI. Management

This will be a manager-managed company. The name and address of each manager is:

ARNOLD J. LAMPERT
636 US Highway 1 # 205 North Palm Beach FL 33408
ANTHONY E. LAMPERT
636 US Highway 1 # 205 North Palm Beach FL 33408

Article VII. Company Existence

The Company's existence shall begin effective as of 1/12/2006.

The undersigned authorized representative of a member executed these Articles of Organization on 1/12/2006.

MICHAEL A. LAMPERT

by K. Sarria as attorney-in-fact

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STATEMENT OF REGISTERED AGENT

LIMITED LIABILITY COMPANY:

Comprehensive Insurance Group II, LLC

REGISTERED AGENT/OFFICE:

Michael A. Lampert
1655 Palm Beach Lakes Blvd.
Suite 900
West Palm Beach FL 33401

I agree to act as registered agent to accept service of process for the company named above at the place designated in this Statement. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.

MICHAEL A. LAMPERT
by K. Sarria as attorney-in-fact

Date: 1/12/2006.

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