

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

L06000013007
FILED 8:00 AM
February 06, 2006
Sec. Of State
dbruce

Article I

The name of the Limited Liability Company is:

FLORIDA STATE NO-FAULT INSURANCE AGENCY LLC

Article II

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

104 EAST FOWLEER AVE
TAMPA, FL. US 33612

The mailing address of the Limited Liability Company is:

104 EAST FOWLEER AVE
TAMPA, FL. US 33612

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:

MANES CHARLES
3020 GATES DR
APT 223
TAMPA, FL. 33613

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: MANES CHARLES

Article V

The name and address of managing members/managers are:

Title: MGRM
MANES CHARLES
3020 GATES DR APT 223
TAMPA, FL. 33613 US

Title: MGRM
ULRICK GERMAIN
5225 SONORA CT APT 10
TAMPA, FL. 33617 US

Signature of member or an authorized representative of a member

Signature: EDWARD STAHLIN

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