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DUNCAN & TARDIF, P. A. SUITE 101, 1601 JACKSON STREET POST OFFICE BOX 249 FORT MYERS, FLORIDA 33902-0249 (Address)		
(City/State/Zip/Phone #)		
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Insurancenter, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 15051 S. Tamiami Trail, Suite 205 Fort Myers, FL 33908

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

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

William K. Nellans 15051 S. Tamiami Trail, Suite 205 Fort Myers, FL 33908

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 domply with the provisions of the 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 as provided for in Chapter 608, F.S.

Registered Agent's Signature

ARTICLE IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

William K. Nellars, Member