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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800) 494-3124
Fax Number : (305) 675-2811

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Chipola Adjusting Services, LLC

Certificate of Status	0
Certified Copy	0
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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED
LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is:

CHIPOLA ADJUSTING SERVICES, LLC

ARTICLE II: Address

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

13770 NW SHUMAN FERRY RD

ALTHA, FL 32421

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED
AGENT SIGNATURE**

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

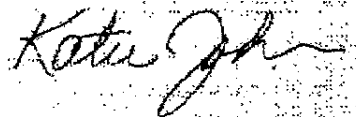
KATIE JOHNS

546 RUSMOR ST

ORANGE PARK, FL 32073

Having been named as registered agent 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 as provided for in Chapter 608, F.S.

x



KATIE JOHNS / Registered Agent's Signature

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

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CHIPOLA ADJUSTING SERVICES, LLC

ARTICLE V: MEMBERS (optional)

Managing Member:

KATIE JOHNS
546 RUSMOR ST
ORANGE PARK, FL 32073

Managing Member:

JOHN K. HALL
13770 NW SHUMAN FERRY RD
ALTHA, FL 32421

x 

Signature of a member or an authorized representative of a member

(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.)

KATIE JOHNS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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