Electronic Articles of Organization
For
Florida Limited Liability Company

L06000073617
FILED 8:00 AM
July 25, 2006
Sec. Of State
gharvey

Article I

The name of the Limited Liability Company is:

POINCIANA INSURANCE AGENCY LLC

Article II

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

827 CYPRESS PARKWAY
POINCIANA, FL. 34758

The mailing address of the Limited Liability Company is:

827 CYPRESS PARKWAY
POINCIANA, FL. 34758

Article III

The purpose for which this Limited Liability Company is organized is:

INSURANCE

Article IV

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

TIMOTHY W COPE
2313 INDIAN MOUND TRAIL
KISSIMMEE, FL. 34746

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: TIMOTHY W COPE

Article V

L06000073617
FILED 8:00 AM
July 25, 2006
Sec. Of State
gharvey

The name and address of managing members/managers are:

Title: MGR
TIMOTHY W COPE
2313 INDIAN MOUND TRAIL
KISSIMMEE, FL. 34746

Title: MGRM
MARIA COPE
2313 INDIAN MOUND TRAIL
KISSIMMEE, FL. 34746

Signature of member or an authorized representative of a member

Signature: TIMOTHY W COPE