

Division of Corporations

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Florida Department of State

Division of Corporations

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FLORIDA/FOREIGN LIMITED LIABILITY CO.**TRIDENT INSURANCE FINANCE, LLC**

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ATTORNEYS AT LAW
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TELEPHONE: 904.359.2000
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From:	Valerie R. Hodge
Email Address:	VHodge@foley.com
Sender's Direct Dial:	904.359.2000
Date:	12/1/2006
Client Matter No:	055996-0101
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MESSAGE:

Valerie R. Hodge Paralegal :FOLEY Foley & Lardner LLP Post Office Box 240
Jacksonville, Florida 32201-0240 One Independent Drive, Suite 1300 Jacksonville, FL
32202 Tel: 904.359.2000, Ext. 8905 Fax: 904.359.8700 vhodge@foley.com

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I – Name:**The name of the Limited Liability Company is: **TRIDENT INSURANCE FINANCE, LLC.****ARTICLE II – Address:**The mailing address and street address of the principal office of the Limited Liability Company are:
701 Park of Commerce Boulevard, Suite 301, Boca Raton, Florida 33487.**ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:**

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

Jonathan L. Neuman

Name

701 Park of Commerce Blvd., Suite 301Florida street address (P.O. Box **NOT** acceptable)**Boca Raton, Florida 33487**

City, State, and Zip

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 completed 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.

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X

Jonathan L. Neuman

(An additional article must be added if an effective date is requested)

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.)

Jonathan L. Neuman, Authorized Representative

Typed or printed name of signee

FILING FEES:

\$100.00 Filing Fee for Articles of Organization
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy (OPTIONAL)
\$5.00 Certificate of Status (OPTIONAL)

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