

## Florida Department of State

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

: A 1 A CORPORATE SERVICES, INC. : 120010000247 Account Number

## FLORIDA/FOREIGN LIMITED LIABII

### CARIBBEAN ONE INSURANCE GROUP LLC

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# EDARTICLES 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: CARIBBEAN ONE INSURANCE GROUP LLC

### ARTICLE II ADDRESS

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

2775 OLD DIXIE HWY SUITE E

KISSIMMEE, FL 34744

## ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agentiare:

**BERTHA ROSA PASTORS** 

1421 BAYCREST DR

WESLEY CHAPEL FL 33544

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..

REPTHA ROSA PASTORS / Registered Agents

### 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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CARIBBEAN ONE INSURANCE GROUP LLC

ARTICLE V MEMBERS (optional)

MANAGING MEMBER:

BERTHA ROSA PASTORS

1421 BAYCREST DR

WESLEY CHAPEL FL 33544

MANAGING MEMBER:

FRANCISCO TORRES

6457 MAINSAIL CT

ORLANDO FL 32807

IN AUG 23 A II: 2
SECRETARY OF STAT

x Francisco Yours

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.

FRANCISCO TORRES

Typed or printed name of signee