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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I NAME

The name of this Company shall be:

WALLSTREET INSURANCE AGENCY, LLC.

### ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 2215 MOUNTAIN MEADOW WAY, VALRICO, FLORIDA 33594.

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

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

PATRICK M. O'CONNOR, ESQUIRE O'CONNOR & ASSOCIATES 1250 S. BELCHER ROAD, SUITE 160 LARGO, FLORIDA 33771 2001 SEP - L P 1: 52
SECRETARY OF STATE ALLAHASSEE, FLORIDA

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 as provided for in Chapter 608, F.S.

O'CONNOR & ASSOCIATES

By:

Patrick M. O'Connor, Registered Agent

### ARTICLE IV MANAGEMENT

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

PATRICK M. O'CONNOR

(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.)

## ARTICLE V MANAGER(S) OR MANAGING MEMBER(S)

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> Name and Address:

MGRM MICHAEL G. WOOLDRIDGE

2215 MOUNTAIN MEADOW WAY

VALRICO, FLORIDA 33594

2001 SEP -4 P 1: 52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA