

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L07000113894
FILED 8:00 AM
November 13, 2007
Sec. Of State
nculligan**

Article I

The name of the Limited Liability Company is:
DIRECT STUDENT SERVICE INSURANCE, LLC.

Article II

The street address of the principal office of the Limited Liability Company is:
1827 RIDGEWAY DRIV
CLEARWATER, FL. US 33755

The mailing address of the Limited Liability Company is:
1827 RIDGEWAY DRIV
CLEARWATER, FL. US 33755

Article III

The purpose for which this Limited Liability Company is organized is:
PROVIDE GROUP ACCIDENT & SICKNESS INSURANCE PLANS.

Article IV

The name and Florida street address of the registered agent is:
CARL KOEHLER
1827 RIDGEWAY DRIVE
CLEARWATER, FL. 33755

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: CARL KOEHLER

Article V

The name and address of managing members/managers are:

Title: MGRM
CARL KOEHLER
1827 RIDGEWAY DRIVE
CLEARWATER, FL. 33755 US

Title: MGRM
JAMES PULLARA
2824 BRAMBLERIDGE CT
HOLIDAY, FL. 34691 US

Article VI

The effective date for this Limited Liability Company shall be:

11/09/2007

Signature of member or an authorized representative of a member

Signature: CARL KOEHLER

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