

LO7000/18636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

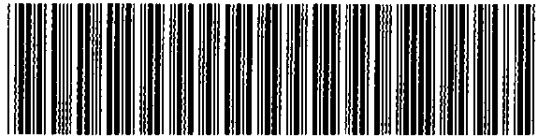
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THE LAW OFFICE  
OF  
JAMES A. CUEVA

November 19, 2007

VIA U.S. MAIL

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

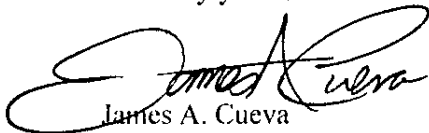
Re: CUEVA INSURANCE AGENCY, LLC Articles of Organization

Attention Registration Section:

Enclosed for filing please find Articles of Organization for **CUEVA INSURANCE AGENCY, LLC** along with a check in the amount of \$130.00. I have enclosed two copies so that a copy of the filing may be returned to me along with a certificate of status at the address shown below.

Please feel free to call me at (305) 648-3735 if you have any questions.

Sincerely yours,



James A. Cueva

Enclosures (3)

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**Articles of Organization**  
for  
**CUEVA INSURANCE AGENCY, LLC**  
a Florida Limited Liability Company (FS § 608.407)

The undersigned, desiring to form a limited liability company under and pursuant to Florida Statute 608 entitled the Florida Limited Liability Company Act, do hereby adopt the following Articles of Organization for such company:

1. **Name.** The name of this company shall be **CUEVA INSURANCE AGENCY, LLC** (hereinafter referred to as the "Company").

2. **Mailing Address.** The mailing address of the Company shall be 13337 S.W. 46 Lane, Miami, Florida 33175 and the street address of the principal office of the Company shall be: 4095 S.W. 67<sup>th</sup> Avenue, Miami, Florida 33155.

3. **Duration/Continuation.** The period of the Company's duration shall be perpetual unless terminated by the unanimous written agreement of all members or by the death, retirement resignation, expulsion, bankruptcy or dissolution of a member or upon the occurrence of any other event which terminates the continued membership of a member, unless the business of the company is continued by the consent of all the remaining members, or by amendment of these Articles of Organization providing for the continued existence of the Company subsequent to the foregoing events.

4. **Members:** The names and addresses of the individuals who will serve as members are as follows:

| <u>Title:</u>   | <u>Name and Address:</u>                                    |
|-----------------|---|
| Managing Member | Eric A. Cueva<br>13337 S.W. 46 Lane<br>Miami, Florida 33175 |

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5. **Registered Agent and Office.** The name and street address of the initial registered agent and office for the Company is as follows: The Law Office of James A. Cueva, 2600 South Douglas Road, Suite 1100, Coral Gables, Florida 33134.


6. **Admission of Additional Members; and Terms and Conditions of such Admissions.** Additional Members may be admitted upon the approval of a majority of the Members of the Company, upon receiving the written application of such new Member, and in the manner set forth in the Bylaws of this Company.

7. **Right to Continue Business.** The remaining members may continue the Business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member of the occurrence of any other event which terminates the continued membership of a member in the

Company.

8. **Management of Company.** The business of the Company shall be managed by the Managing Member. The name and address of the Managing Member is set forth above in Article 4.

IN WITNESS WHEREOF, the undersigned, through their authorized representative, have hereunto set their hands and seals this 19<sup>th</sup> day of November, 2007.

  
JAMES ADRIAN CUEVA  
AUTHORIZED REPRESENTATIVE

Having been named as Registered Agent and to accept service of process for the above stated Limited Liability Company, 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

The Law Office of James A. Cueva

By:

  
JAMES ADRIAN CUEVA  
MANAGING MEMBER

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

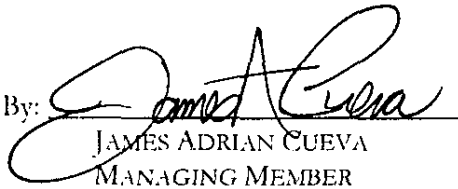
PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **CUEVA INSURANCE AGENCY, LLC**
2. The name and the Florida street address of the registered agent are:

The Law Office of James A. Cueva  
2600 South Douglas Road, Suite 1100  
Coral Gables, Florida 33134

*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.*

By:

  
JAMES ADRIAN CUEVA  
MANAGING MEMBER

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