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SECRETARY OF STATE
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AUG 2 9 2008

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Figliolo Insurance Group, LLC
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joseph M. Figliolo
(Name of Person)
Figliolo Insurance Group, LLC
(Firm/Company)
7536 15th Street
(Address)
Vero Beach, FL 32966
(City/State and Zip Code)
For further information concerning this matter, please call:
Joseph M. Figliolo at (772) 321-4975
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times 130.00 Filing Fee \& Certificate of Status \$\times 155.00 Filing Fee \& Certified Copy (additional copy is enclosed) \$\times 160.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
Figliolo Insurance Group, LLC (Must end with the words "Limited Liabil	lity Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street address of the pr	rincipal office of the Limited Liability Co	mpany is	; :
Principal Office Address:	Mailing Address:		
7536 15th Street	7536 15th Street	_	
Vero Beach, FL 32966	Vero Beach, FL 32966	- -	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)		ner _	
The name and the Florida street address of the r	registered agent are:	li li	(222222)
Joseph M. Figliolo	ASS	28	Andrews:
Name	in a		
7536 15th Street		AMII: 45	Contract of the last
Florida street add	dress (P.O. Box <u>NOT</u> acceptable)	E 5	
Vero Beach, FL 329)6ရို		
City, State, a	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 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..

Registere (REQUIRED)

ARTICLE IV- 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:	
"MGR" = Mana "MGRM" = Ma			
	imping iviender		
MGR		Joseph M. Figliolo	
		7536 15th Street	
		Vero Beach, FL 32966	
MGRM		Joette M. Figliolo	
		101 40th Court	
		Vero Beach, FL 32968	
		·	
			
		\$140.40 At 100.00 At	
(Use attachment	tifnecessary)		
(Obe attachment	. If necessary)		
ICLE V: Effective	date, if other than the	date of filing: (OPTIONA	L)
	· · · · · · · · · · · · · · · · · · ·	e specific and cannot be more than five business day	s prior
90 days after the d	late of filing.)		
DEQUIDED S	CNATION.		
	GNATURE:		
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<u>KEQUIKED</u> SI	(In accordance with sec of this document consti- that the facts stated h Joseph M. Fig	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury herein are true.)	
<u>KEQUIKED</u> SI	(In accordance with sec of this document consti- that the facts stated h Joseph M. Fig	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury herein are true.	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)