

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

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Sec. Of State
gharvey

Article I

The name of the Limited Liability Company is:
AM INSURANCE AND FINANCIAL SERVICES LLC.

Article II

The street address of the principal office of the Limited Liability Company is:
4548 31ST PLACE SW
NAPLES, FL. 34116

The mailing address of the Limited Liability Company is:
4548 31ST PLACE SW
NAPLES, FL. 34116

Article III

The purpose for which this Limited Liability Company is organized is:
INSURANCE BROKER SELLING PROPERTY AND CASUALTY, LIFE AND
HEALTH INSURANCE IN BEHALF OF ADMITTED INSURANCE COMPANIES

Article IV

The name and Florida street address of the registered agent is:
SILVIO ORTIZ
4548 31ST PLACE SW
NAPLES, FL. 34116

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: SILVIO ORTIZ

Article V

The effective date for this Limited Liability Company shall be:
11/08/2008

Signature of member or an authorized representative of a member
Signature: SILVIO ORTIZ