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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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EXAMINER

DOUGLAS J. BURNS, P.A. Douglas J. Burns

Licensed to Practice in Florida and Georgia

Attorney at Law Certified Public Accountant Telephone: 727.725.2553 Facsimile: 727.725.9584 Email: dburns@ij.net

2559 Nursery Road, Suite A Clearwater, Florida 33764

January 6, 2009

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, Florida 32314

Re: Hartley Insurance, LLC

Dear Sir or Madam:

Enclosed please find the original and one copy of the above-referenced Articles of Organization, along with a check in the amount of \$125.00 for the filing fee.

Thank you for your assistance. Please do not hesitate to contact me if you have any questions or concerns.

Sincerely,

DOUGLAS J. BURNS, P.A.

Deborah A. Gibson, CPS/CAP

Deboral a. Kibon, CPS/CAP

Legal Administrative Assistant

Enclosures

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR HARTLEY INSURANCE, LLC

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The undersigned, he being a person, competent to contract for the purpose of forming a limited liability company under the laws of the State of Florida, does hereby adopt the following articles of organization in accordance with Section 608.401.

ARTICLE I

NAME OF BUSINESS: The name of the Limited Liability Company shall be Hartley Insurance, LLC.

ARTICLE II

NATURE OF BUSINESS: The general nature and purpose of business to be transacted, promoted and carried on by the company is to engage in any activity or business now or hereafter authorized and permitted under the laws of the United States and the State of Florida to be done or exercised by a company organized for profit.

ARTICLE III

INITIAL CAPITAL: The amount of capital with which this company shall begin business is Five Hundred and 00/100 Dollars (\$500.00).

ARTICLE IV

TERM OF EXISTENCE: This company shall have a perpetual term of existence, commencing upon receipt of these Articles by the Secretary of State.

ARTICLE V

ADDRESS OF BUSINESS: The initial mailing and business address of the principal office of the proposed company in the State of Florida shall be:

2559 Nursery Road, Suite A Clearwater, Florida 33759

ARTICLE VI

INITIAL REGISTERED AGENT: The name and street address of the initial registered agent is: Douglas J. Burns, 2559 Nursery Road, Suite A. Clearwater, Florida 33764.

ARTICLE VII

MANAGEMENT: The Limited Liability Company is to be a manager managed company.

	F, the undersigned subscriber to this instrument. Articles of ce. LLC places his hand and seal this <u>2</u> day of arwater, Florida.
In the presence of:	
WITNESS a. Silvan	Douglas & Burns, Member
WITNESS	_
STATE OF FLORIDA)) ss
COUNTY OF PINELLAS)
produced was known to be the person describ to the foregoing Articles of Organi	appeared Douglas J. Burns, personally known to me or who as identification and who did/did not take an oath, and bed in and who executed the foregoing instrument as Member ization and who, after being first duly sworn, acknowledged uses set forth and that all information is true and correct to his
WITNESS my hand and sea Florida.	al on this 6th day of January, 2009, at Clearwater,
	Notary Public
DEBORAH A GIBSON Notary Public, State of Florida My Comm. Expires Nov. 20, 2009 No. DD492262	Printed Name: Deboral L. G. bsm

CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, 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 Hartley Insurance, LLC.
- 2. The name and the Florida street address of the registered agent is:

Douglas J. Burns, 2559 Nursery Road, Suite A. Clearwater, Florida 33764

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 properly and complete my duties, and I am familiar with and accept the obligations of my position as registered agent.

	Douglas J. Burns
STATE OF FLORIDA)	
COUNTY OF PINELLAS)	
produced as i was known to be the person described in and Agent to the foregoing Articles of Organizat	Douglas J. Burns, personally known to me or who dentification and who did/did not take an oath, and I who executed the foregoing instrument as Resident ion who, after being first duly sworn, acknowledged orth and that all information is true and correct to his
WITNESS my hand and seal on t Clearwater, Florida.	his, 2009, at
DEBORAH A GIBSON Notary Public, State of Florida My Comm. Expires Nov. 20, 2009 No. DD492262	Notary Public Printed Name: Deborah A. Gibson
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