

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

L09000021115
FILED 8:00 AM
March 03, 2009
Sec. Of State
Isellers

Article I

The name of the Limited Liability Company is:
FLORIDA FARMERS INSURANCE GROUP LLC

Article II

The street address of the principal office of the Limited Liability Company is:
610 SYCAMORE STREET
SUITE 190
CELEBRATION, FL. 34747

The mailing address of the Limited Liability Company is:
PO BOX 470939
CELEBRATION, FL. 34747

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
L. BRUCE SWIREN, PA
1516 E. HILLCREST STREET
SUITE 200
ORLANDO, FL. 32803

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: AARON C SWIREN

Article V

The name and address of managing members/managers are:

Title: MGRM
PATRICIA C KENDRICK
9250 CYPRESSWOOD DRIVE
LAKE WALES, FL. 32898

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Signature of member or an authorized representative of a member

Signature: AARON C. SWIREN