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(City/State/Zip/Phone #)

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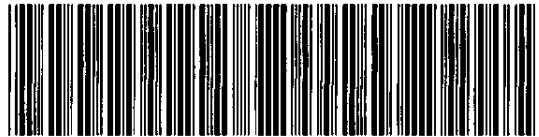
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EXAMINER



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FILED
SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
09 MAR 12 PM 2:27

LAW OFFICES
NEILL, GRIFFIN, TIERNEY, NEILL & MARQUIS

CHARTERED

311 SOUTH SECOND STREET

SUITE 200

FORT PIERCE, FLORIDA 34950

RICHARD V. NEILL*¹
CHESTER B. GRIFFIN*²
J. STEPHEN TIERNEY, III
RICHARD V. NEILL, JR.*
RENÉE MARQUIS-ABRAMS*

March 9, 2009

MAILING ADDRESS:
POST OFFICE BOX 1270
FORT PIERCE, FL 34954
TELEPHONE (772) 464-8200
FAX (772) 464-2566

*BOARD CERTIFIED WILLS, TRUSTS & ESTATES LAWYER
¹BOARD CERTIFIED TAXATION LAWYER
²BOARD CERTIFIED CIVIL TRIAL LAWYER
OF COUNSEL

Secretary of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Re: **TRADITION INSURANCE SERVICES, LLC**

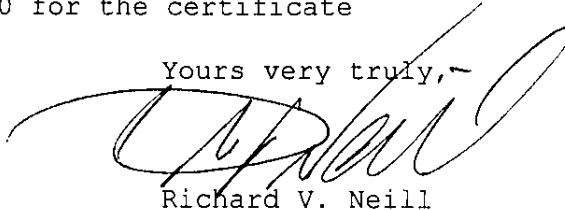
Dear Sir:

Enclosed is the original Articles of Organization of TRADITION INSURANCE SERVICES, LLC. for filing with your office.

Please furnish the undersigned with a Certificate of this filing.

Also enclosed is an extra copy of the Articles, together with our client's check in the amount of \$130.00 representing your filing fee of \$125.00 and \$5.00 for the certificate

Yours very truly,



Richard V. Neill

/b
Encs.

ARTICLES OF ORGANIZATION

OF

TRADITION INSURANCE SERVICES, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be

TRADITION INSURANCE SERVICES, LLC

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company shall be 8011 Plantation Lakes Dr., Port St. Lucie, Fl 34986

ARTICLE III - DURATION

The Company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The company's existence shall terminate not later than June 30, 2050, unless the Company is earlier dissolved as provided in these Articles of Organization.

ARTICLE IV - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the company in the State of Florida is KATHLEEN K. KNIGHT, 8011 Plantation Lakes Dr. Port St. Lucie, Fl 34986

ARTICLE V - MANAGEMENT

The company shall be a member-managed company in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these articles of organization. The names and address of the members are:

NEILL, GRIFFIN, TIERNEY, NEILL & MARQUIS

CHARTERED

P.O. BOX 1270, FORT PIERCE, FLORIDA 34954 - TELEPHONE (772) 464-8200

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAR 12 PM 2:27

NAME

ADDRESS

KATHLEEN K. KNIGHT

8011 Plantation Lakes Dr.
Port St. Lucie, Fl 34986

ALICE LEE

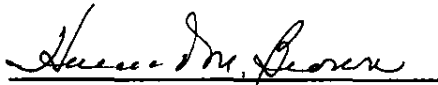
7936 Saddlebrook Drive
Port St. Lucie, FL 34986

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these Articles of Organization at Ft. Pierce, Florida, on this 9 day of March, 2009.


KATHLEEN K. KNIGHT

STATE OF FLORIDA
COUNTY OF ST. LUCIE

Sworn to and subscribed before me this 9th day of March, 2009, by KATHLEEN K. KNIGHT who is personally known to me.


NOTARY PUBLIC,
State of Florida at Large
My Commission Expires: _____

NOTARY PUBLIC-STATE OF FLORIDA
Harriett M. Brown
Commission # DD593996
Expires: OCT. 23, 2010
BONDED THRU ATLANTIC BONDING CO., INC.

ACCEPTANCE OF REGISTERED AGENT

The undersigned, being the person named in the Articles of Organization of **TRADITION INSURANCE SERVICES, LLC** as the registered agent of this limited liability company, hereby consents to accept service of process for the above stated Company at the place designated in the Articles of Organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his or her duties, and is familiar with and accepts the obligations of the position of registered agent.


KATHLEEN K. KNIGHT
REGISTERED AGENT

DATED: 3-9-09