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EFFECTIVE DATE 5/29/09

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09 MAY 27 AM 8:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

MAY 29 2009

EXAMINER

COVER LETTER

EFFECTIVE DATE 5/20/09

TO: **Registration Section**
Division of Corporations

SUBJECT: Ethix Reinsurance Intermediaries LLC
Name of Limited Liability Company

FILED
09 MAY 27 AM 8:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dale F Schmidt
Name of Person

PEOple Premier Inc
Firm/Company

1000 118th Avenue North
Address

St Petersburg, Florida 33716-2332
City/State and Zip Code

DSchmidt@PEOplePremier.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dale F Schmidt at (727) 561-9700
Name of Person — Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $125.00 Filing Fee

☐ $130.00 Filing Fee & Certificate of Status

☐ $155.00 Filing Fee & Certified Copy (additional copy is enclosed)

☑ $160.00 Filing Fee, Certificate of Status & 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

EFFECTIVE DATE 5/20/09

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
09 MAY 27 AM 8:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:
The name of the Limited Liability Company is:

Ethix Reinsurance Intermediaries LLC
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	**Mailing Address:**
1000 118th Avenue North	10716 Zieglers Drive
St Petersburg, Florida 33716-2332	Brooklyn Park, MN 55443

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Debra Snyder
Name

1000 118th Avenue North
Florida street address (P.O. Box **NOT** acceptable)

St. Petersburg, FL 33716 FL
City, State, 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..

Debra A Snyder
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	**Name and Address:**
MGRM	Dale F. Schmidt 13814 Lake Point Drive Clearwater, FL 33762-3390
Manager	Thomas E Pawlik 1331 Beacon Hill Drive Colorado, CO 80126

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: May 20, 2009. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Dale F Schmidt
Typed or printed name of signee

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)