

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

L10000013863
FILED 8:00 AM
February 05, 2010
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:
COASTAL INSURANCE ADVISORS, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
5129 CASTELLO DRIVE
SUITE 4
NAPLES, FL. 34103

The mailing address of the Limited Liability Company is:
4751 BONITA BEACH RD
BONITA SPRINGS, FL. 34134

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:
SALVATORE A SCHIAFONE
4751 BONITA BEACH RD
BONITA SPRINGS, FL. 34134

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: SALVATORE SCHIAFONE

Article V

The name and address of managing members/managers are:

Title: MGRM
SALVATORE A SCHIAFONE
4751 BONITA BEACH RD
BONITA SPRINGS, FL. 34134

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Signature of member or an authorized representative of a member

Signature: SALVATORE SCHIAFONE