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FLORIDA/FOREIGN LIMITED LIABILITY CO. INSURANCE CREDENTIALING SPECIALIST, LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

INSURANCE CREDENTIALING SPECIALIST, LLC

ARTICLE II ADDRESS

The principal office of the Limited Liability Company is:

119 MEADOWLANDS DRIVE ROYAL PALM BEACH, FLORIDA 33411

The mailing address of the Limited Liability Company is:

PO BOX 981 LOXAHATCHEE, FLORIDA 33470

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ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

MELANIE MILLER 119 MEADOWLANDS DRIVE ROYAL PALM BEACH, FLORIDA 33411

Having been named as registered agent 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.

MELANIE MILLER / Registered Agent's signature

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ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
MELANIE MILLER
PO BOX 981
LOXAHATCHEE, FLORIDA 33470

MANAGING MEMBER
TAMMY SIMON-REDMOND
PO BOX 981
LOXAHATCHEE, FLORIDA 33470

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Signature of a member of 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.

MELANIE MILLER