

L1000000 67057

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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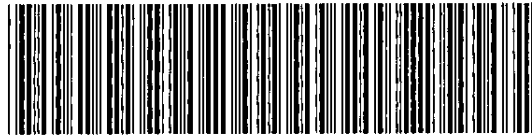
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B. KOHR
JUN 23 2010
EXAMINER

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DIVISION OF CORPORATIONS
10 JUN 23 AM 8:10

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JUN 23 AM 8:10

CONTACT: Kim Weidenbach

DATE: 06/23/10

REF. #: 000672.127264

CORP. NAME: ARISON INSURANCE SERVICES OF FLORIDA, LLC

- | | | |
|------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 535420 FOR \$ 130.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
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| <input type="checkbox"/> CERTIFIED COPY | <input checked="" type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

ARTICLES OF ORGANIZATION

OF

ARISON INSURANCE SERVICES OF FLORIDA, LLC

FILED
STATE SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JUN 23 AM 8:10

1. Name. The name of this limited liability company is **ARISON INSURANCE SERVICES OF FLORIDA, LLC** (the "Company"), and it shall be formed as a limited liability company under Chapter 608 of the laws of the State of Florida.

2. Duration. The Company shall exist from the date of filing of these Articles of Organization with the Florida Secretary of State, and the Company's existence shall be perpetual.

3. Purpose. The Company is organized for the purpose of transacting all lawful activities and businesses that may be conducted by a limited liability company under the laws of Florida.

4. Place of Principal Office. The mailing address and the street address of the Company's principal office is **10314 U.S. Highway 19, Port Richey, Florida 34668**.

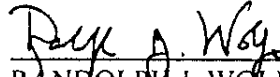
5. Registered Agent and Office. The name of the initial registered agent of the Company is **F & L Corp.** The street address of the initial registered agent of the Company is **One Independent Drive, Suite 1300, Jacksonville, Florida 32202**.

6. Management of the Company. The management of the Company shall be vested in the managers of the Company. The initial managers of the Company are as follows:

<u>Name</u>	<u>Address</u>
John R. Koko	10314 U.S. Highway 19 Port Richey, Florida 34668
Christina M. Rashid	1 South Dearborn Street, Suite 2100 Chicago, IL 60603
Daniel R. Needham	1 South Dearborn Street, Suite 2100 Chicago, IL 60603
Joseph Jude Thompson	1 South Dearborn Street, Suite 2100 Chicago, IL 60603

7. Operating Agreement. The members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

The undersigned executed these Articles of Organization on the 23rd day of June, 2010. (In accordance with Section 608.408(3), *Florida Statutes*, the execution of these Articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



RANDOLPH J. WOLFE

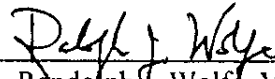
Authorized Representative of Member

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the within-named Company, at the place designated herein, and being familiar with the obligations of that position, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

F & L CORP

By:



Randolph J. Wolfe, Vice President

Dated: June 23, 2010