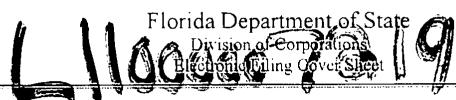
chelle A. Narea 12/28/2020

Division of Corporations



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### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COVERAGE ONE INSURANCE GROUP, LLC

| Certificate of Status | 1       |
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| Certified Copy        | 0       |
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# AMENDED AND RESTATED ARTICLES OF ORGANIZATION OF COVERAGE ONE INSURANCE GROUP, LLC

### **ARTICLE I: NAME**

The name of the limited liability company is Coverage One Insurance Group, LLC (the "Company"

### ARTICLE II: ADDRESS

The street and mailing address of the principal office of the Company is 1901 W. Cypress Creek Road, #103, Fort Lauderdale, FL 33309.

## ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

David Ettinger 1901 W Cypress Creek Road, #103 Ft. Lauderdale, FL 33309

### ARTICLE IV: PURPOSE

The Company's purpose is to transact any and all lawful business for which a limited liability company may be organized under the Florida Revised Limited Liability Company Act.

### ARTICLE V: MANAGEMENT

The management of the Company shall be vested in one or more managers.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this \(\times\) day of January, 2021.

Coverage One Holdings Inc., Member

Name: David Ettinger Title: President

### STATEMENT OF REGISTERED AGENT OF COVERAGE ONE INSURANCE GROUP, LLC

Having been named as registered agent to accept service of process for the above stated limited liability company, 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 605 of the Florida Statutes.

chelle A. Narea - Fo: Flsos (18586176383)

David Ettinger Date: January 24, 2021