

L11000018866



Hediko E. Haidacher
296 SW Otter Run Pl
Stuart, FL 34997-3048

(Address)

(City/State/Zip/Phone #)



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FEB 14 2011

EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Ildiko Insurance Advisors 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: Same

296 S.W. Otter Run Pl.
Stuart FL 34997

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:

Ildiko Haidacher
Name

296 S.W. Otter Run Place
Florida street address (P.O. Box **NOT** acceptable)

Stuart FL 34997
City, State, and Zip

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ALLAHUSSEIN.FLORENDA

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.

Ildiko Haidacher
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:

MGR

Idiko E. Haidacher
296 SW Otter Run Pl
Stuart, FL 34997-3048

MGRM

Suzanne Haidacher
4831 Via Palm Lakes #1211
WPa Fl 33417

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 2-4-11 (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:

Idiko Haidacher
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Idiko Haidacher

Typed or printed name of signee

Filing Fees:

\$ 155.00

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)