

APR. 1. 2011 2:28PM
DIVISION OF CORPORATIONS

GASSMAN, BATES & ASSOCIATES, P.A.

O. 7396 P.P. 1 of 1

L11000039404

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**FLORIDA LIMITED LIABILITY CO.
INSURANCE SUCCESS SYSTEMS, L.L.C.**

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EXAMINER

APR. 1. 2011 2:28PM

GASSMAN, BATES&ASSOC.

NO. 7396 P. 2

CONSENT TO USE OF SIMILAR CORPORATE NAME

THE UNDERSIGNED, ALAN S. GASSMAN, being the Assistant Secretary and Counsel of **INSURANCE SUCCESS SYSTEMS, INC.**, corporate document number P05000149003, does hereby acknowledge and consent to the use of the similar corporate name, **INSURANCE SUCCESS SYSTEMS, L.L.C.**

DATED this 1st day of April, 2011.

INSURANCE SUCCESS SYSTEMS, INC.

By: 

ALAN S. GASSMAN

Its: Assistant Secretary and Counsel

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY****ARTICLE I - Name:-**

The name of the Limited Liability Company is: **INSURANCE SUCCESS SYSTEMS,
L.L.C.**

ARTICLE II - Address:-

The mailing address and street address of the principal office of the Limited Liability Company is:

**4114 Woodlands Parkway, Suite #402
Palm Harbor, FL 34685-3494**

ARTICLE III - Written Operating Agreement

Any operating agreement entered into by the Members of the Limited Liability Company, and any amendments or restatements thereof, shall be in writing, and shall govern all matters relating to the governance of the affairs of the Limited Liability Company, the conduct of its business and the relations of its Members, including without limitation, the amendment of these Articles. No oral agreement among any of the Members or Managers of the Limited Liability Company shall be deemed or construed to constitute any portion of, or otherwise affect the interpretation of, any written operating agreement of the Limited Liability Company, as amended and in existence from time to time.

ARTICLE IV - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Alan S. Gassman

Name

1245 Court Street, Suite 102

Florida street address (P.O. Box NOT acceptable)

Clearwater, FL 33756

City, State, and Zip

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.


Registered Agent's Signature

ARTICLES OF ORGANIZATION OF INSURANCE SUCCESS SYSTEMS, L.L.C.**PAGE 1**

**Alan S. Gassman, Esquire
1245 Court Street Suite 102
Clearwater, FL 33756
(727) 442-1200
Florida Bar #: 371750
Audit Fax #:**

Audit Fax No: _____

(An additional article must be added if an effective date is requested)

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.)



ALAN S. GASSMAN

JAH\Handwritten Success Systems, L.L.C. (FL)\Articles of Organization 1a.wpd
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