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Account Name : SCOTT M. GRANT, P.A.

Account Number: 102603003131 Phone: (239)649-4848 Fax Number: (239)643-9810

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Ifriedman@friedmanpartners.net

KE CE IVED 1 AUG 12 AM 9: 47 Ecretary of state 1 AHASSEF FLORID FLORIDA LIMITED LIABILITY CO.
ProGuard Warranty Group, LLC

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AUG 15 2011

EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is:

PROGUARD WARRANTY GROUP, LLC

ARTICLE II ADDRESS

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

P.O. Box 609 Orayling, MI 49738

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

1457 N.E. Ocean Blvd., #16 Stuart, FL 34996

ARTICLE III DURATION

The period of duration for the Limited Liability Company shall be indefinite.

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by a Manager and the name and address of such Manager who is to serve as Manager is:

Lawrence A. Friedman P.O. Box 609 Grayling, MI 49738

ARTICLE Y ADMISSION OF ADDITIONAL MEMBERS

Upon unanimous approval by the Members, the Company is authorized to issue additional Units in the Company and to admit Additional Members to the Company.

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ARTICLE VI MEMBERS' RIGHTS TO CONTINUE BUSINESS

The remaining members of the company shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

ARTICLE VII REGISTERED AGENT

The name and address of the registered agent is:

Scott M. Grant, Esq. Scott M. Grant, P.A. 3400 Tamiami Trail N., Suite 201 Naples, FL 34103

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, Florida Statutes.

REGISTERED AGENT

Scott M. Gpant

MANAGER:

SWIFOOCT (TOAL Corporated) 201 ARTICLES OF ORGANIZATION FOR LLC - Name Name (Aprel de