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# ARTICLES OF ORGANIZATION OF FOTEK INSURANCE AND WELLNESS, LLC, <u>A FLORIDA LIMITED LIABILITY COMPANY</u>

## ARTICLE I NAME

The name of this limited liability company is FOTEK INSURANCE AND WELLNESS, LLC, referred to in these Articles of Organization as the "Company."

## ARTICLE II REGISTERED OFFICE AND AGENT

The principal office address of the Company in Florida is 6635 Willow Park Drive, Naples, Florida 34109. The Company's registered agent is David B. Diamond, 6635 Willow Park Drive, Naples, Florida 34109.

#### ARTICLE III DURATION

The Company shall have perpetual duration.

#### ARTICLE IV ORGANIZER

The organizer of the Company is James Foglio, who is a natural person at least eighteen (18) years old.

## ARTICLE V PURPOSE AND POWERS

This Company is organized with the purpose to sell, broker, administer, and or otherwise deal in life, health, dental, disability, long term care, and auto insurance, provide health and wellness counseling services, provide human resources and payroll services; and to do all things incidental thereto, together with all purposes allowed by law.

#### ARTICLE VI MANAGEMENT

The Company is to be managed by a Manager as further provided in the Company's Regulations. The Manager is an agent of the Company with the authority to make any contracts, enter into any transactions, or make any commitments on behalf of the Company, each of whom,

FOTEK INSURANCE AND WELLNESS, LLC ARTICLES OF ORGANIZATION PAGE 1 OF 2

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individually shall have that authority. The name and address of the Manager is:

James Foglio 6635 Willow Park Drive Naples, Florida 34109

# ARTICLE VII ADMISSION OF NEW MEMBERS

The Company may admit new members as provided in the Company's Regulations.

# ARTICLE VIII RELATIONSHIP OF ARTICLES OF ORGANIZATION TO <u>OPERATING AGREEMENT</u>

If a provision of these Articles of Organization differs from a provision of the Company's Regulations, then, to the extent allowed by law, the Regulations will govern.

Executed this <u>31</u> day of December, 2011.

Manager

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FOTEK INSURANCE AND WELLNESS, LLC ARTICLES OF ORGANIZATION PAGE 2 OF 2

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/ REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE / REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Fotek Insurance and Wellness, LLC

2. The name and address of the registered agent and office is:

David B. Diamond 6635 Willow Park Drive Naples, Florida 34109

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 family a with accept the obligations of my position as registered agent.

Name: David B. Diamond

Date: December \_\_\_\_, 2011

FOTEK INSURANCE AND WELLNESS, LLC REGISTERED AGENT ACCEPTANCE

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