

May 10 12:12:57p

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Florida Department of State  
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From:

Account Name : CSH SERVICES, LLC  
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Fax Number : (561)455-9885

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

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**FLORIDA LIMITED LIABILITY CO.  
VANGUARD INSURANCE HOLDINGS, LLC**

Certificate of Status	0
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B. BOSTICK

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EXAMJNER

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**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I      NAME**

The name of the Limited Liability Company is:

VANGUARD INSURANCE HOLDINGS, LLC

**ARTICLE II      ADDRESS**

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

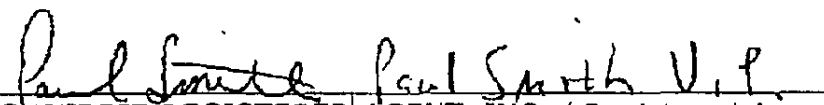
6190 SW 56TH STREET  
DAVIE, FLORIDA 33314

**ARTICLE III      REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

SUPERBIZ REGISTERED AGENT, INC.  
2761 VISTA PARKWAY, STE E4  
WEST PALM BEACH, FLORIDA 33411

Having been named as registered agent 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.

x  Paul Smith V.P.

SUPERBIZ REGISTERED AGENT, INC. / Registered Agent's signature

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**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS**

MANAGING MEMBER  
SHELDON FRIEDBERG  
6190 SW 56TH STREET  
DAVIE, FLORIDA 33314

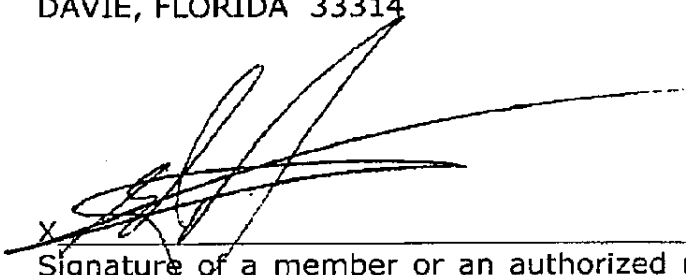
MANAGING MEMBER  
DAVE HERMAN  
6190 SW 56TH STREET  
DAVIE, FLORIDA 33314

MANAGING MEMBER  
JEFF KISOR  
6190 SW 56TH STREET  
DAVIE, FLORIDA 33314

MANAGING MEMBER  
PATRICK PANAGIOTOU  
6190 SW 56TH STREET  
DAVIE, FLORIDA 33314

MANAGING MEMBER  
MICHAEL TOFFOLI  
6190 SW 56TH STREET  
DAVIE, FLORIDA 33314

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X   
\_\_\_\_\_  
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.

SHELDON FRIEDBERG

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