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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	· #)
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(850) 245-6051.

COVER LETTER

TO:

Registration Section **Division of Corporations**

ON THE TEE INSURANCE SERVICES 1, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all corresp	ondence concerning this matt	er to the following:	
Edward	B. Rosenbau	ım	
		Name of Person	
Arresta er alla Maria		Firm/Company	
200 Bis	cayne Blvd. V	Vay PH 4808	
Control of the American Contro		Address	
Miami,	Florida 3313	1	
		y/State and Zip Code	
ONTHETE	EELLC@YAHOO.		
	,	for future annual report notification)	
For further information	concerning this matter, please	call:	
Edward B.	Rosenbaum	$_{at}$ $\frac{786}{453-01}$	188
Name	of Person	Area Code & Daytime Telep	hone Number
Enclosed is a check fe	or the following amount:		
	C		
□\$125.00 Filing Fee	■\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C	ircle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compa	any is:	
ON THE TEE INSURANCE SERVICES 1, LLC		
(Must end with the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
	f the principal office of the Limited Liabil	ity Company is:
·		
Principal Office Address:	Mailing Address:	
Edward B. Rosenbaum	Edward B. Rosenbaum	
200 Biscayne Blvd. Way PH 4808	200 Biscayne Blvd. Way PH 4808	
Miami, Florida 33131	Miami, Florida 33131	
	•	
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	istered Office, & Registered Agent's Si wn Registered Agent. You must designate an individual of the registered agent are:	or another
Edward B. Rosenbaum		
	Name	
200 Diseasure Blad Mov		\$ 5 B
200 Biscayne Blvd. Way	street address (P.O. Box NOT acceptable)	<u>म</u> ार
Miami	33131	PM 4: 40 OF STATE
Wilding	City, State, and Zip	
	•	
liability company at the place designate registered agent and agree to act in this all statutes relating to the proper and a and accept the obligations of my position.	and to accept service of process for the abouted in this certificate, I hereby accept the associated in this certificate, I hereby accept the associated in this certificate, I hereby accept the associated in the complete performance of my duties, and I come as registered agent as provided for in Company as Signature (REQUIRED)	appointment as the provisions of an familiar with
(Co	ONTINUED)	·

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM	Edward B. Rosenbaum
	200 Biscayne Blvd. Way PH 4808
	Miami, Florida 33131
MGRM	Jack B. Zwerner
	8174 South Las Vegas Blvd. Suite 109-384
	Las Vegas, Nevada 89123
MGRM	Steve Sparks
	2023 Trentham Road
	Lake Sherwood, California 91361
(Use attachment if necessary)	

REQUIRED SIGNA

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.)

Edward B. Rosenbaum

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)