

L14000005314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

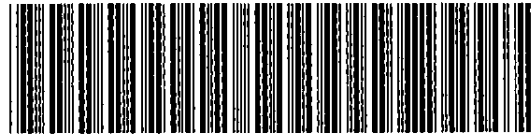
(Document Number)

Certified Copies ☒

Certificates of Status ☒

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RECEIVED
PROPERTY OF STATE
2014 JAN -8 PM 12:02
10 AM
SUFFOLK COUNTY, FLORIDA

FILED
14 JAN -9 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 10 2014

T. BROWN

~~114-1356~~

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Elementary Insurance Agency, LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Robert L. Ricker

Name of Person

Elementary Insurance Agency, LLC

Firm/Company

2367 Centerville Road, First Floor

Address

Tallahassee, FL 32308

City/State and Zip Code

bob.ricker@elements-ins.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert L. Ricker

at

850

528-8861

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$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 Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
14 JAN -9 PM 2:44
DIVISION OF CORPORATIONS

January 8, 2014

ROBERT L. RICKER
2367 CENTERVILLE RD FIRST FL
TALLAHASSEE, FL 32308

SUBJECT: ELEMENTARY INSURANCE AGENCY, LLC
Ref. Number: W14000001356

We have received your document for ELEMENTARY INSURANCE AGENCY, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown
Regulatory Specialist II

Letter Number: 214A00000477

**ARTICLES OF ORGANIZATION
OF
ELEMENTARY INSURANCE AGENCY, LLC**

FILED
14 JAN -9 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned authorized representative of one or more members, for the purpose of forming a limited liability company ("Company") pursuant to the Laws of the State of Florida and particularly Chapter 605, Florida Statutes, hereby submits the following Articles of Organization:

Article 1

Name

The name of the Company shall be Elementary Insurance Agency, LLC. These Articles of Organization may be referred to as the "Articles", and the Operating Agreement of the Company may be referred to as the "Operating Agreement."

Article 2

Office

The initial principal office and mailing address of the Company shall be 2367 Centerville Rd., 1st Floor, Tallahassee, FL 32308. The Company may designate such alternate places of business according to procedures for Company action as set forth in its Operating Agreement. Books and record of the Company shall be kept at its principal office or at such other place as may be permitted by law.

Article 3

Purpose

The Company is organized to engage in any and all business permitted under the Laws of Florida and other jurisdictions.

Article 4

Powers

The Company shall have all of the common law and statutory powers of a limited liability company under the Laws of Florida, except as expressly limited or restricted by the terms of these Articles or the Operating Agreement, and all of the powers and duties reasonably necessary to operate the Company pursuant to the Operating Agreement, as it may be amended from time to time.

Article 5

Term of Existence

The Company shall have perpetual existence.

Article 6

Initial Registered Office; Name and Address of Registered Agent

The initial registered agent of the Company is Robert L. Ricker and the address of the initial registered office of the registered agent is 2367 Centerville Rd., 1st Floor, Tallahassee, Florida 32308.

In witness whereof, the undersigned authorized representative of the members has affixed his signature this 7 day of January, 2014.

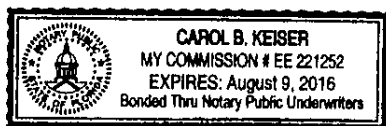
Robert L. Ricker

Robert L. Ricker
Authorized Member Representative

STATE OF FLORIDA
COUNTY OF LEON

I hereby certify that on this day personally appeared before me, the undersigned authority, ROBERT L. RICKER, to me personally known as identification and known to me to be the person who executed the foregoing instrument and acknowledged before me that he executed the same freely and voluntarily for uses and purposes therein set forth.

In witness whereof, I have my hand and official seal this 7 day of January, 2014.



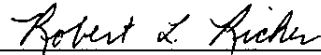
Carol B. Keiser

Notary Public
My commission Expires:

**CERTIFICATE DESIGNATING REGISTERED AGENT
AND REGISTERED OFFICE**

In compliance with Chapter 605, Florida Statutes, the following is submitted:

Elementary Insurance Agency, LLC desiring to organize as a limited liability company under the laws of the State of Florida, has designated 2367 Centerville Rd., 1st Floor, Tallahassee, Florida 32308, as its initial Registered Office and has named Robert L. Ricker located at said address as its initial Registered Agent.



Robert L. Ricker
Authorized Member Representative

Having been named 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 605, Florida Statutes.



Robert L. Ricker
Registered Agent