

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**L15000162220  
FILED 8:00 AM  
September 23, 2015  
Sec. Of State  
smmason**

**Article I**

The name of the Limited Liability Company is:

AMERICAS ANNUITY, HEALTH AND LIFE INSURANCE PLANS, LLC

**Article II**

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

2925 SW 133RD AVENUE  
MIRAMAR, FL. 33027

The mailing address of the Limited Liability Company is:

PO BOX 278465  
MIRAMAR, FL. 33027

**Article III**

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

LONZIE BURGESS  
2925 SW 133RD AVENUE  
MIRAMAR, FL. FL

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.

Registered Agent Signature: LONZIE BURGESS

### **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: MGR  
LONZIE BURGESS  
PO BOX 278465  
MIRAMAR, FL. 33027

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### **Article V**

The effective date for this Limited Liability Company shall be:

09/23/2015

Signature of member or an authorized representative

Electronic Signature: LONZIE BURGESS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.