

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

L16000003118
FILED 8:00 AM
December 31, 2015
Sec. Of State
cgolden

Article I

The name of the Limited Liability Company is:

NATIONAL INSURANCE BENEFITS CENTERS LLC

Article II

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

1835 E. HALLANDALE BEACH BLVD.
#876
HALLANDALE BEACH, FL. 33009

The mailing address of the Limited Liability Company is:

1835 E. HALLANDALE BEACH BLVD.
#876
HALLANDALE BEACH, FL. 33009

Article III

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

JOHN D FERENCHIK
1835 E. HALLANDALE BEACH BLVD.
#876
HALLANDALE BEACH, FL. 33009

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: JOHN D. FERENCHIK

Article IV

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

Title: MGR
CYNTHIA E FERENCHIK
1835 E. HALLANDALE BEACH BLVD. #876
HALLANDALE BEACH, FL. 33009

Title: MGR
JOHN D FERENCHIK
1835 E. HALLANDALE BEACH BLVD. #876
HALLANDALE BEACH, FL. 33009

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Article V

The effective date for this Limited Liability Company shall be:

01/01/2016

Signature of member or an authorized representative

Electronic Signature: JOHN D. FERENCHIK

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.

L160000003118

DATE: 12/6/16

TO: Claretha Golden

FROM: John D. Ferenchik

RE: Document Number: W16000000458

Entity Name: NATIONAL INSURANCE BENEFITS CENTERS LLC

Tracking Number: 000280516210

Pin Number: 6210

Dear Claretha Golden,

Per your email of yesterday 1/5/16 received at 3:03 PM EST and per your request of our phone call of this morning. I, John D. Ferenchik am the registered agent and managing member of the LLC which is the name in conflict: National Insurance Benefits Center LLC, document number L15000165869 which was recently dissolved. I have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The name of the new entity I am releasing it to will be: National Insurance Benefits Centers, LLC (the word Centers is plural).

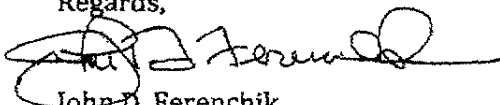
Document Number: W16000000458

Tracking Number: 000280516210

If you have any additional questions in reference to this, do not hesitate to give me a call. My contact information is listed below.

Thank you in advance for your attention to this matter.

Regards,



John D. Ferenchik

john@iaofamerica.com

727-422-4288

Fax 800-961-4348

