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. (Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETAINY OF STATE TALLAHASSEF FLORIDA

COVER LETTER

: **

	egistration Section ivision of Corporations		
SUBJECT	Next Risk Management LLC		
SOBSECT		Limited Liabili	y Company
The enclos	ed Articles of Organization and fee(s)) are submitted	for filing.
Please retu	rn all correspondence concerning this	matter to the fo	ollowing:
	William F. Comiskey, Jr.		
		Name of	Person
		Firm/Co	npany
	PO Box 29-4170		
	Boca Raton, FL 33429-4170	Addre	SS
		City/State and	Zip Code
	bill.comiskey@exclusiveprograms.c	•	
	E-mail address: (to be u	sed for future a	nnual report notification)
For further i	nformation concerning this matter, pl	ease call:	
	William F. Comiskey, Jr.	561	859-4444
	Name of Person	Area Code	Daytime Telephone Number
Enclosed is	s a check for the following amount:		
\$125.00 F	siling Fee \$\frac{130.00}{2}\$ Filing Fee \$\frac{8}{2}\$ Certificate of Status	Certific	of Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RTICLE I - Name:	
e name of the Limited Liability Company is:	
Next Risk Management LLC	
(Must end with the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")
FICLE II - Address: mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
312 E Camino Real	PO Box 29-4170
Boca Raton, FL 33432	Boca Raton, FL 33429-4170
FICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Register business entity with an active Florida registration.)	egistered Agent's Signature: stered Agent. You must designate an individual or
name and the Florida street address of the registered ager	nt are:
William F. Comiskey, Jr.	
Nar	ne

312 E Camino Real
Florida street address (P.O. Box NOT acceptable)
Boca Raton FL 33432

City State Zip

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 as provided for in Chapter 605, F.S..

Registered Agent's Signature (RAQUISED)

(CONTINUED)

Page 1 of 2

16 MAR 20 PH 5: 21
SECRETARY OF SHALL

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The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
Manager	William F. Comiskey, Jr.
	312 E Camino Real
	Boca Raton, FL 33432

Prince of the second se	
(Use attachment if necessary)	
of filing.)	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be lament of State's records.
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Date of this notice: 03-23-2016

Employer Identification Number:

81-1930833

Form: SS-4

Number of this notice: CP 575 G

NEXT RISK MANAGEMENT LLC
NEXT RISK MANAGEMENT
% WILLIAM F COMISKEY JR SOLE MBR
PO BOX 294170
BOCA RATON, FL 33429

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 81-1930833. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is NEXT. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.

(IRS USE ONLY) 575G

03-23-2016 NEXT O 999999999 SS-4

Keep this part for your records. CP 575 G (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 G

999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 03-23-2016 () -

EMPLOYER IDENTIFICATION NUMBER: 81-1930833

FORM: SS-4

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INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023 hindalahdadalahdadkadkaaddadkidad NEXT RISK MANAGEMENT LLC NEXT RISK MANAGEMENT % WILLIAM F COMISKEY JR SOLE MBR PO BOX 294170 BOCA RATON, FL 33429