

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

L16000120131  
FILED 8:00 AM  
June 22, 2016  
Sec. Of State  
mtmoon

**Article I**

The name of the Limited Liability Company is:  
PEACE RIVER INSURANCE AGENCY, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
281 CAPRI ISLES COURT  
PUNTA GORDA, FL. US 33950

The mailing address of the Limited Liability Company is:  
281 CAPRI ISLES COURT  
PUNTA GORDA, FL. US 33950

**Article III**

Other provisions, if any:  
INSURANCE AGENCY

**Article IV**

The name and Florida street address of the registered agent is:  
SUNBIZ SUPPORT, LLC  
16913 LAKESIDE DRIVE  
MONTVERDE, FL. 34756

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: GINA JENKINS

### **Article V**

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

Title: AR  
RANDALL A SUMMEY  
281 CAPRI ISLES  
PUNTA GORDA, FL. 33950 US

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### **Article VI**

The effective date for this Limited Liability Company shall be:

06/15/2016

Signature of member or an authorized representative

Electronic Signature: GINA JENKINS

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.