Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000262372 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (950)617-6391

From:

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number : 072720000036 Phone : (407)843-4600 Fax Aumber : (407)845-4444

**Enter the email address for this business ontity to be used for inture annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA LIMITED LIABILITY CO. PEACOCK INSURANCE AGENCY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

Page 3

ARTICLES OF ORGANIZATION PEACOCK INSURANCE AGENCY, LLC

Andre, Gail

ARTICLE 1 - NAME

The name of this limited liability company is Peacock Insurance Agency, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is 265 Drivers Way, Hardeeville, South Carolina 29927.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 N. Eola Drive, Orlando, Florida 32801. The name of the initial registered agent of the Company at that address is James J. Hoctor.

ARTICLE IV - MANAGEMENT.

The Company is a manager-managed limited liability company and the initial manager of the Company is Peacock Management Services, LLC, a Florida limited liability company.

James J. Hoctor, Authorized Representative

ACCEPTANCE OF REGISTERED AGENT

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, Florida Statutes.

James J. Hoctor