

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

**L18000035543
FILED 8:00 AM
February 08, 2018
Sec. Of State
nculligan**

Article I

The name of the Limited Liability Company is:

I PLUS INSURANCE LLC

Article II

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

3900 WOOD LAKE BLVD.
301
GREENACRES, FL. UN 33463

The mailing address of the Limited Liability Company is:

14576 KEYLIME BLVD
LOXAHATCHEE, FL. UN 33470

Article III

Other provisions, if any:

TO PROVIDE INSURANCE AND FINANCIAL SERVICES TO THE PUBLIC

Article IV

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

LEMEL DORVILUS
14576 KEYLIME BLVD
LOXAHATCHEE, FL. 33470

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: LEMEL DORVILUS

Article V

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

Title: MGR
LEMEL DORVILUS
14576 KEYLIME BLVD
LOXAHATCHEE, FL. 33470 UN

Title: MGR
RENELLE DORVILUS
14576 KEYLIME BLVD
LOXAHATCHEE, FL. 33470 UN

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Signature of member or an authorized representative

Electronic Signature: LEMEL DORVILUS

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.