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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FL



**MEENAN**  
REGULATORY AND LEGISLATIVE ATTORNEYS

August 20, 2021

*Via Hand Delivery*

NEW FILING SECTION DIVISION  
DIVISION OF CORPORATIONS  
THE CENTRE OF TALLAHASSEE  
2415 N. MONROE STREET, SUITE 810  
TALLAHASSEE, FL 32303

**Re: IRONWOOD WARRANTY OF FLORIDA, LLC  
ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

Dear Sir/Madam:

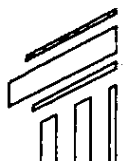
On behalf of the above referenced company, please find attached application for Articles of Organization for Florida Limited Liability Company, a copy of the company's articles of organization and check in the amount of \$160.00 for their Filing Fee, Certificate of Status and Certified Copy of the Articles of Organization.

If you have any questions, please contact me and I will be happy to expedite an answer.

Sincerely,

Halley P. Kelly, FRP  
Paralegal  
[Halley@meenanlawfirm.com](mailto:Halley@meenanlawfirm.com)

JDW/hpk  
Enclosures



**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Ironwood Warranty of Florida, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph Walters

Name of Person

Meenan PA

Firm/Company

PO Box 11247

Address

Tallahassee, FL 32302

City/State and Zip Code

halley@meenanlawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph Walters      850      425-4000  
at (      )  
Name of Person      Area Code      Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Ironwood Warranty of Florida, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

400 Missouri Avenue, Suite 120  
Jeffersonville, IN 47130

Mailing Address:

400 Missouri Avenue, Suite 120  
Jeffersonville, IN 47130

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box NOT acceptable)

Tallahassee

FL

32301

City

State

Zip

SECRETARY OF STATE  
TALLAHASSEE, FL

2021 AUG 20 PM 4: 50

FILED

*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.*

By: Corporation Service Company

Ashley Isbert

Ashley Isbert, Assistant VP

Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

MGR

Gerald W. Gerichs  
400 Missouri Avenue, Suite 120  
Jeffersonville, IN 47130

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_. (OPTIONAL)

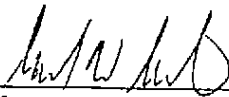
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**



\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
I am aware that any 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.

GERALD W. GERICHs

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

**ARTICLES OF ORGANIZATION  
OF  
IRONWOOD WARRANTY OF FLORIDA, LLC**

The undersigned individual, acting as sole organizer, hereby forms a limited liability company under the Florida Revised Limited Liability Company Act (the "Act") and does hereby adopt as the Articles of Organization of such limited liability company the following:

**Article 1. Name.** The name of the limited liability company shall be Ironwood Warranty of Florida, LLC (the "Company").

**Article 2. Duration.** The Company shall have a perpetual duration, unless sooner dissolved in accordance with the Act.

**Article 3. Purpose.** The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

**Article 4. Principal Office.** The street and mailing address of the principal office of the Company is 400 Missouri Avenue, Suite 120, Jeffersonville, Indiana 47130.

**Article 5. Registered Office and Registered Agent.**

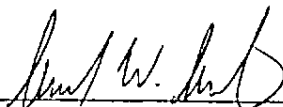
(a) The address of the registered office of the Company in Florida is 1201 Hays Street, Tallahassee, Florida 32301.

(b) The name of the registered agent of the Company at the above registered office is Corporation Service Company.

**Article 6. Management.** The Company is to be managed by a Manager. The initial Manager of the Company is Gerald W. Gerichs.

Dated: July 28, 2021.

AUTHORIZED REPRESENTATIVE OF THE COMPANY



\_\_\_\_\_  
Signature of Authorized Representative

GERALD W. GERICH, MANAGER  
Printed Name and Title