#### 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.

(((H21000324509 3)))



H210003245093ABC-

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

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BARNETT, KIRKWOOD, KOCHE, LONG & FOSTER, P.A.

Account Number : 072731001155 Phone : (813)253-2020 : (813)251-6711 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: sosfilings@barnettbolt.com

#### FLORIDA LIMITED LIABILITY CO.

Dziuba Insurance Agency, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help



8132516711 BBKLKF 06:07:02 p.m. 08-30-2021 2/5

H21000324509

# ARTICLES OF ORGANIZATION OF DZIUBA INSURANCE AGENCY, LLC

The undersigned hereby organizes a limited liability company under the provisions of the Florida Revised Limited Liability Company Act (the "Act"), and pursuant to the following Articles of Organization:

#### ARTICLE 1 Name

The name of this limited liability company is:

Dziuba Insurance Agency, LLC

(hereafter, the "Company").

### ARTICLE 2 Effective Date

The Company shall have perpetual existence, commencing effective on August 30, 2021.

## ARTICLE 3 Mailing Address and Principal Office

The address of the principal office and mailing address of the Company is 12766 Dundee Lane, Naples, Florida 34120.

### ARTICLE 4 Initial Registered Office and Agent

The street address of the initial registered office of the Company is 12766 Dundee Lane, Naples, Florida 34120, and the name of the initial registered agent of the Company at that address is Stephanic Dziuba.

H21000324509

#### ARTICLE 5 Management

The Company shall be a "manager managed limited liability company" for purposes of the Act. The name and mailing address of the initial manager of the Company are:

Stephanie Dziuba 12766 Dundee Lane Naples, FL 34120

### ARTICLE 6 Restrictions on Transfer and Operating Agreement

The membership interests of the Company are subject to certain transfer restrictions contained in the Company's operating agreement, as amended and/or restated from time to time ("Operating Agreement"). The membership interests of the Company have not been registered under the Securities Act of 1933, as amended, and may not be offered, sold, or otherwise transferred, pledged or hypothecated except in accordance with the Company's Operating Agreement and applicable law. Any member of the Company or its assignce shall be bound by the terms and conditions of the Company's Operating Agreement. The Company will furnish to any member or assignee, upon request and without charge, a full statement of the restrictions and a copy of the Company's Operating Agreement.

#### ARTICLE 7 Indemnification

The Company shall indemnify its managers and members to the fullest extent authorized by law.

1

1

H21000324509

WITNESS WHEREOF, the undersigned authorized representative of the members has executed these Articles of Organization on the 30 day of August, 2021.

STEPHÄNIE DZIUBA, as Manager

5/5

H21000324509

BBKLKF

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE OF DZIUBA INSURANCE AGENCY, LLC

Pursuant to the provisions of Section 605.0113 of the Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

- ١. The name of the limited liability company is Dziuba Insurance Agency, LLC.
- 2. The name and address of the registered agent and office are:

Stephanie Dziuba 12766 Dundee Lane Naples, FL 34120

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.

Dated: August  $\frac{20}{20}$ , 2021

4