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| 30,031 | | | Limited Lial | pility Company | · | | |
| The en | closed Articles o | f Organization and fee(s | s) are submitt | ed for filing. | | | |
| Please | return all corresp | ondence concerning this | s matter to the | e following: | | | |
| • | Travis Mille | er | | | | | |
| | | | Name | of Person | | | |
| | Radey Law | Firm | | | | | |
| | Firm/Company | | | | | | |
| | 301 South E | Bronough Street, Suite 2 | .00 | | | | |
| | | | Ad | dress | , <u>.</u> | | |
| | Tallahassee, | FL 32301 | | | | | |
| | evan@npuins | COD | City/State : | and Zip Code | | | |
| | | E-mail address: (to be u | sed for future | annual report notificat | ion) | | |
| For furth | er information co | oncerning this matter, pl | ease call: | | | | |
| | Travis Miller | | 850 | 425-6654 | | | |
| | Nan | ne of Person | | Daytime Telephor | ne Number | | |
| Enclose | yd is a check for r | he following amount: | | | | | |
| | 5.00 Filing Fee | □\$130.00 Filing Fee Certificate of Status | Certi | 55.00 Filing Fee & fied Copy is enclosed) | □\$160.00 Filing Fee, Certificate of Status & Certified Copy (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 OF MODULAREM SPECIALTY INSURANCE SOLUTIONS, LLC

The undersigned authorized representative of one or more members, for the purpose of forming a limited liability company ("Company") pursuant to the Laws of the State of Florida, and particularly Chapter 605. Florida Statutes, hereby submits the following Articles of Organization:

Article 1 Name

The name of the Company shall be Modularem Specialty Insurance Solutions, LLC. These Articles of Organization may be referred to as the "Articles", and the Operating Agreement of the Company may be referred to as the "Operating Agreement."

Article 2 Office

The mailing address and address of the initial principal office of the Company shall be One West Las Olas Blvd., Suite 200, Ft. Lauderdale, FL 33301. The Company may designate such alternate place of business as it may deem appropriate from time to time. Books and records of the Company shall be kept at its principal office or at such other place as may be permitted by law.

Article 3 Purpose

The Company is organized to engage in any and all business permitted under the Laws of Florida and other jurisdictions.

Article 4 Powers

The Company shall have all of the common law and statutory powers of a limited liability company under the Laws of Florida, except as expressly limited or restricted by the terms of these Articles or the Operating Agreement, and all of the powers and duties reasonably necessary to operate the Company pursuant to the Operating Agreement, as it may be amended from time to time.

Article 5 Term of Existence

The Company shall have perpetual existence.



Article 6 Initial Registered Office; Name and Address of Registered Agent

The initial registered agent of the Company is Travis Miller and the address of the initial registered office of the registered agent is 301 South Bronough Street, Suite 200, Tallahassee, Florida 32301.

Having been named as Registered Agent and to accept Service of Process for the above stated limited liability company at the place designated in these Articles of Organization. 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.

Travis Miller Régistered Agent

In witness whereof, the undersigned authorized representative of the member has affixed his signature this 2nd day of March, 2022.

Travis L. Miller

Authorized Member Representative

