Florida Department of State Division of Corporations

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Division of Corporations

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FLORIDA LIMITED LIABILITY CO. MSL INNOVATION INSURANCE LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:			
Company is: 10065 NW 46 St Apt			
ARTICLE III - Registered Agent, Registered Offi The name and the Florida street address of the a Company cannot serve as its own Registered Agent. You must designate with an active Florida registration.)	registered agent are: (The Limited Liability te an individual or another business entity		
MARIA ANGECICA PEREZ R 10065 HW 46 St Apt			
ARTICLE IV The name and title of each person authorized to Liability Company: (MGR or AMBR)			
POARA AUGELICA TEREZ	PAUSEL (AMBR.)		
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Required Signatures:

C:			
Signature of a member or an authorized represent			
in all authorized representations of the second sec	ntative of	_	
In accordance with	TRUTAGO: a men	iber.	
In accordance with section 605.0203 (1) (b), Florida Statutes, the constitutes an affirmation under the penalties of perjury that the I am aware that any false information submitted in a document	e execution of this at		
I am aware that any false information submitted in a document constitutes a third degree felony as provided for in	facts state 11 mis (iii	kumeni	t
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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..

Registered Agent's Signature (REQUIRED)