Electronic Articles of Organization
For
Florida Limited Liability Company

L230001
FILED 8:
March 3(
Sec. Of S
cgolden

Article I

The name of the Limited Liability Company is:

TRACI LYNN INSURANCE LLC

Article II

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

3432 STATE ROAD 580
LOT 347
SAFETY HARBOR, FL. 34695

The mailing address of the Limited Liability Company is:

3432 STATE ROAD 580
LOT 347
SAFETY HARBOR, FL. 34695

Article III

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

TRACI SCHLUER
3432 STATE ROAD 580
LOT 347
SAFETY HARBOR, FL. 34695

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: TRACI SCHLUER

Article IV

The effective date for this Limited Liability Company shall be:

03/30/2023

Signature of member or an authorized representative

Electronic Signature: TRACI SCHLUER

I am the member or authorized representative submitting these Articles of Organization and affirm that the