

1/11/2024 Jan. 11. 2024

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Division of Corporations

No. 4732

P. 1

**L24000014092**

Florida Department of State  
Division of Corporations  
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**FLORIDA LIMITED LIABILITY CO.  
DeKoning Insurance Advisory LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION  
FOR  
DEKONING INSURANCE ADVISORY LLC**

**ARTICLE I**

The name of this limited liability company is: DeKoning Insurance Advisory LLC (hereinafter referred to as the "Company").

**ARTICLE II**

The street address and mailing address of the principal office of the Company is: 366 Royal Tern South, Ponte Vedra Beach, Florida 32082.

**ARTICLE III**

The period of duration for the Company shall begin as of the effective date for the filing of these Articles of Organization, and shall continue indefinitely until the occurrence of any event which requires the dissolution of the Company under applicable law or as otherwise set forth in the Operating Agreement for the Company.

**ARTICLE IV**

The street address of the initial registered office of the Company is: 822 A1A North, Suite 315, Ponte Vedra Beach, Florida 32082, and the name of the initial registered agent of the Company at that address is Dublin Business Services, LLC.

**ARTICLE V**

The Company is to be managed by one or more managers, and is therefore a manager-managed company. The number of managers shall not be less than one (1), but may be such greater number as appointed by the Member from time to time in accordance with the Operating Agreement of the Company. Initially, there shall be one (1) manager, whose name and address is:

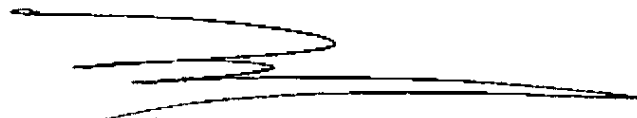
Name

Address

Michael G. DeKoning

366 Royal Tern South  
Ponte Vedra Beach, Florida 32082

THE UNDERSIGNED, being the authorized representative, hereby makes, subscribes, acknowledges and files these Articles of Organization in accordance with Section 605.0203, Florida Statutes, and affirms under the penalties of perjury that the facts stated herein are true. The undersigned is aware that false information submitted in a documents to the Department of State constitutes a third degree felony as provided for in Section 817.155, Florida Statutes. The undersigned accordingly has hereunto set his hand and seal this 11th day of January, 2024.



Michael G. DeKoning

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT / REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: DeKoning Insurance Advisory LLC
2. The name and address of the registered agent and office is:

Dublin Business Services, LLC  
822 A1A North, Suite 315  
Ponte Vedra Beach, Florida 32082

*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.*

Dublin Business Services, LLC

By: Heather Crooke

Its: Manager