



THE UNITED STATES  
CORPORATION  
COMPANY

197000000/66

ACCOUNT NO. : 072100000032

REFERENCE : 250756 7123302

AUTHORIZATION :

COST LIMIT : \$ PREPAID

ORDER DATE : February 6, 1997

ORDER TIME : 9:56 AM

ORDER NO. : 250756-005

CUSTOMER NO: 7123302

CUSTOMER: Mr. Craig E. Johnson  
MR. CRAIG E. JOHNSON

10402 400th Avenue

Genoa City, WI 53128

200002085302--2  
-02/12/97--01078--005  
\*\*\*\*337.50 \*\*\*\*337.50

DOMESTIC FILING

NAME: INSURANCE SOLUTIONS, L.L.C.

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING

XX CERTIFIED COPY  
     PLAIN STAMPED COPY  
     CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

EXAMINER'S INITIALS:

FILED  
97 FEB 11 AM 11:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
97 FEB -6 AM 11:37  
DIVISION OF CORPORATION

W97-3078  
162 2-6

TR

2/06/97 CORPORATE DETAIL RECORD SCREEN 1:30 PM  
NUM: H31074 ST:FL ACTIVE/FL PROFIT FLD: 11/21/1984 EFF: 11/19/1984  
FEI#: 59-2469332  
NAME : INSURANCE SOLUTIONS, INC.  
PRINCIPAL: 4494 SOUTHSIDE BLVD. CHANGED: 04/10/91  
ADDRESS SUITE 100  
JACKSONVILLE, FL 32216-5401  
RA NAME : WOMBLE, PATRICIA M NAME CHG: 05/01/96  
RA ADDR : 2446 SNOWY EGRET DRIVE ADDR CHG: 01/21/97  
JACKSONVILLE, FL 32224 US  
ANN REP : (1995) BY 02/14/95 (1996) A 05/01/96 (1997) BY 01/21/97

1. MENU, 3. OFFICERS, 7. LIST, 8. NEXT, 9. PREV

ENTER SELECTION AND CR:



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

February 6, 1997

CSC NETWORKS  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2607

SUBJECT: INSURANCE SOLUTIONS, L.L.C.  
Ref. Number: W97000003078

We have received your document for INSURANCE SOLUTIONS, L.L.C. and check(s) totaling \$337.50. However, your check(s) and document are being returned for the following:

The document is illegible and not acceptable for microfilming.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6932.

Kimberly Rolfe  
Document Specialist

Letter Number: 997A00006469

**Articles of Organization  
for Florida Limited-Liability Company**

**ARTICLE I - Name**

The name of the Limited Liability Company is: EquiSolutions, L.L.C.

**ARTICLE II - Address**

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

959 Valley Forge Lane, Naples, Florida 34110-8836

**ARTICLE III - Duration**

The period of duration for the Limited Liability Company is perpetual.

**ARTICLE IV - Management**

The Limited Liability Company is to managed by the members and the names and addresses of the managing members are:

Craig Johnson  
959 Valley Forge Lane  
Naples, FL 34110-8836

Renee' Needham Johnson  
959 Valley Forge Lane  
Naples, FL 34110-8836

Edward C. Johnson  
959 Valley Forge Lane  
Naples, FL 34110-8836

FILED  
97 FEB 11 AM 11:05  
SECRET OF STATE  
TALLAHASSEE, FLORIDA

#### **ARTICLE V - Admission of Additional Members**

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

Except as otherwise provided in these Articles of Organization or the Regulations of the Company, no person may be admitted as a member unless each member consents in writing to the admission of the additional member.

#### **ARTICLE VI - Members Rights to Continue Business**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

(a) It is the intention of the Members that the business of the Company be continued by the Members, or those remaining, pursuant to the provisions of these Articles of Organization or the Regulations of the Company, notwithstanding the occurrence of any event which would result in a statutory dissolution of the Company pursuant to the laws of the State of Florida, and no Member shall be released or relieved of any duty or obligation hereunder by reason thereof; provided, however, that the business of the Company shall be terminated, its affairs wound-up and its property and assets distributed in liquidation on the earlier to occur of:

- (i) the expiration of the term of the Company, if any, set forth in these Articles of Organization;
- (ii) written consent by each of the Members that the Company should be dissolved;
- (iii) subject to the provisions of paragraph (b) below, the death, retirement, resignation, incompetency, bankruptcy, withdrawal or removal from the Company of a Member; or
- (iv) entry of a decree of judicial dissolution.

For purposes of these Regulations, bankruptcy shall be deemed to have occurred when the party in question files a petition under any section or chapter of the Federal Bankruptcy Code, as amended, or becomes subject to an order for relief under Title 11 of the United States Code Annotated or is declared bankrupt or insolvent in a state bankruptcy or insolvency hearing.

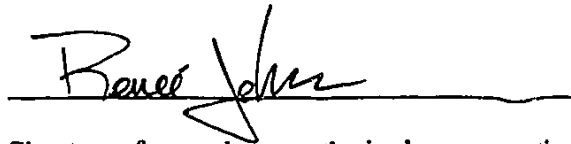
(b) Upon the occurrence of any event set forth in paragraph (iii) of subsection (a) above, the business of the Company shall be continued pursuant to the provisions of these Articles of Organization and the Regulations of the Company if, within a period of 90 days from the date of such occurrence, there is at least one remaining Member, and each remaining Member elects in writing that it be so continued.

NOTE: If no provisions are to be made in Article V and VI remove this page before submitting for filing with the Department of State.

### AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of EquiSolutions, L.L.C. deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 5,000.00
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 0  
A description of the property is attached and made a part hereto.
- 4) the amount of cash or property anticipated to be contributed by member(s) is \$ 5,000.00
- 5) the total amount of 2, 3 and 4 is \$ 5,000.00



Signature of a member or authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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

**PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, 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: EquiSolutions, L.L.C.
2. The name and address of the registered agent and office is:

Edward C. Johnson  
959 Valley Forge Lane  
Naples, Florida 34110-8836

**FILED**  
97 FEB 11 AM 11:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

By: \_\_\_\_\_

Edward C. Johnson

2/10/97  
(Date)

Filing Fee: \$35 for Designation of Registered Agent