197000000983

August 5, 1997

Florida Department of State Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 904-487-6052

Re: Florida Casualty Investors, L.C.

Gentlemen:

Enclosed are the original and one copy of the Articles of Organization, Consent to Appointment by Registered Agent, and Affidavit of Membership and Contributions for the above referenced limited liability company. Please file the originals, indicate the filing date on the copies, and return the copies to:

Charles Smith 2981 S.R. 434 West, Suite 500 Longwood, Florida 32779 407-682-4454

Also, enclosed is a check covering the fees and charges for the items listed below:

1.	Filing Fee for Articles of Organization and Affidavit	\$250.00
2.	Designation of Registered Agent	\$ 35.00
3.	Certified Copy of Articles of Organization	<u>\$ 52.50</u>
	Total Fees	\$337.50

Thank you for your cooperation.

harles S. Dec

Charles Smith

Very truly yours,

Enclosures

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ARTICLES OF ORGANIZATION OF FLORIDA CASUALTY INVESTORS, L.C.

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The undersigned, being the Members and Organizers of the Limited Liability Company hereby being formed under the Florida Statutes Annotated Sections 608.401 to 608.471, do hereby adopt the following Articles Of Organization for the Limited Liability Company:

FIRST: The name of the Limited Liability Company is:

Florida Casualty Investors, L.C.

SECOND: The Limited Liability Company shall continue until the occurrence of an event set forth in the Operating Agreement which causes the termination of the Limited Liability Company.

THIRD: The Limited Liability Company is organized to engage in and do any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company may be organized in accordance with the Florida Statutes Annotated Sections 608.401 to 608.471, including all powers and purposes now and hereafter permitted by law to a limited liability company.

FOURTH: The street address of the initial registered office of the Limited Liability Company in Florida is 2981 S.R. 434 West, Suite 500, Longwood, Florida 32779, and the name of the initial registered agent of the Limited Liability Company in Florida at that address is Charles Smith.

FIFTH: The principal place of business of the Limited Liability Company is 2981 S.R.434 West, Suite 500, Longwood, Florida 32779.

SIXTH: The Limited Liability Company is to be managed by the Manager. The names and addresses of the initial Manager are: Charles Smith, having an address at 2981 S.R.434 West, Suite 500, Longwood, Florida 32779

SEVENTH: The total amount of cash (and a description and agreed value of any property other than cash) contributed to the Limited Liability Company, as capital, by the Members is \$363, 500.00. The allocations and distributions of the Limited Liability Company shall be made in proportion to the Members' Percentage Interests, as set forth in the Operating Agreement.

EIGHTH: Additional capital contributions may be made at such times and in such amounts as may hereafter may be agreed by the unanimous vote of the Members, in accordance with the terms and conditions of the Operating Agreement of the Limited Liability Company. No additional capital contributions have been agreed to by the Members at this time.

NINTH: The membership interests of the Members are evidenced by Certificates of Membership.

TENTH: The existing Members shall have the right to admit additional Members to the Limited Liability Company, by the unanimous vote or consent of the Members, in accordance with the terms and conditions of the Operating Agreement of the Limited Liability Company.

ELEVENTH: The remaining Members of the Limited Liability Company, by the affirmative vote or consent of Members holding a majority of the Members' Percentage Interests (other than the Member who caused the Withdrawal Event), may continue the Limited Liability Company upon 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.

TWELFTH: The Limited Liability Company has at least two Members.

THIRTEENTH: None of the Members of the Limited Liability Company are liable for payment of any debt, obligation or other liability of the Limited Liability Company.

IN WITNESS WHEREOF, the Members have executed and acknowledged these Articles Of Organization on August 25, 1997.

In the presence of:

ADMINISTRATORS ADVISORY

GROUP, INC.

President

STATE OF FLORIDA, COUNTY OF SEIN NOLE , SS.:

The foregoing instrument was acknowledged before me on the 25 day of August, 1997, by Charles Smith. Charles Smith is personally known to me, or ___ produced the following type of identification:

Notary Public

My commission expires on

STATE OF FLORIDA, COUNTY OF SEMINOLE, , SS.:

The foregoing instrument was acknowledged before me on the 25 day of August, 1997, by Charles Smith, to me known, who being duly sworn, did depose and say and did acknowledge that he is the President of Administrators Advisory Group, Inc., the corporation described in and which executed the foregoing Articles Of Organization; and that he signed his name thereto by the order of the board of directors of the said corporation. He is personally known to me, or produced the following type of identification:

Notary Public

My commission expires on

Linda S Harden

Linda S Harden

Linda S Harden

C6888792

Expires August 03, 2001

Affidavit of Membership and Contributions (Pursuant to F.S. § 608.407(2))



State of Florida
County of Seminola

Before the undersigned authority personally appeared Charles Smith who on oath says:

- 1. That he is a member of Florida Casualty Investors, L.C.
- 2. That Florida Casualty Investors, L.C. has at least two members.
- 3. The amount of the cash and description and agreed value of the property other than cash contributed by the members is \$1,000.
- 4. The amount anticipated to be contributed by the members is \$362,500.

Further affiant sayeth naught.

Charles Smith

Sworn to and subscribed before me this 25 day of August, 1997 by Charles Smith who is personally known to me or ___ who has produced the following as identification:

Notary Public

LINDA S. HARDEN

(Notary Public - Printed or Typed Name)

Commission Expiration Date & Commission Number:





CONSENT TO APPOINTMENT BY REGISTERED AGENT

I, having been named as Registered Agent for Florida Casualty Investors, L.C., hereby voluntarily consent to serve as Registered Agent for Florida Casualty Investors, L.C.

I know and understand the duties and responsibilities of a Registered Agent as set forth in the Florida Statutes Annotated Sections 608.401 to 608.471, and I hereby accept those duties and responsibilities.

Dated: August 2≤, 1997

print:

Charles Smith

SECRETARY OF STATE
DIVISION OF CORPORATIONS