Electronic Articles of Organization
For
Florida Limited Liability Company

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Article I

The name of the Limited Liability Company is:

FONTE INSURANCE SERVICES, LLC

Article II

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

8201 PETERS ROAD
1000
PLANTATION, FL. US 33324

The mailing address of the Limited Liability Company is:

8201 PETERS ROAD
1000
PLANTATION, FL. US 33324

Article III

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

ALEX M FONTE
6261 SW 24 PLACE
302
DAVIE, FL. 33314

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: ALEX FONTE

Article IV

The effective date for this Limited Liability Company shall be:

01/28/2021

Signature of member or an authorized representative

Electronic Signature: ALEX FONTE

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