

ACCOUNT NO. : 072100000032

REFERENCE: 906005 11102A

**AUTHORIZATION:** 

COST LIMIT : S PPD

ORDER DATE: November 21, 2000

ORDER TIME : 2:50 PM

ORDER NO. : 906005-005

CUSTOMER NO: 11102A

CUSTOMER: Ivan M. Lefkowtiz, Esq

Lefkowitz Bloom & Van Leuven,

P.a.

430 North Mills Avenue

100003473651--1 -11/22/00--01002--006 \*\*\*\*155.00 \*\*\*\*155.00

Orlando, FL 32803

### DOMESTIC FILING

NAME:

APPRAISAL SPECIALISTS OF CENTRAL FLORIDA, L.L.C.

### EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom - EXT. 1104

EXAMINER'S INITIALS:

RECEIVED

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JUNISION OF COSPORATION
TALL ANASCHE, FLORIDA

FILED

ONOV 21 AM 8: 31

CORETARY OF STATE
LAHASSEE FISTATE

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

Appraisal Specialists of Central Florida, L.L.C.

### ARTICLE II - Address:

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

818 West Mabbette Street, Kissimmee, Florida 34741

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name of the Florida street address of the registered agent are:

	<u> </u>
	Name
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	430 North Mills Avenue
Florida	street address (P.O. Box NOT acceptable)
	Orlando, Florida 32803
	City, State, and Zip

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 608, F.S.

Registered Agent's Signature

ARTICLE IV - Management (Check box if applicable) [X] The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

## ARTICLE V - Effective Date

The Limited Liability Company shall have an effective date of:

Date of Filing  Cellen Whitstone		SECRI	00 N(	
Signature of a member or an authorized repre	sentative of a member	NA NA		<u></u> 2
(In accordance with section 608.408(3), Florida Stadocument constitutes an affirmation under the per	athtee the evecution	$\sim 22.5$		Ė₽R
facts stated herein are tr	ue.)		I	日日と
CAllen Whitston		70.0	<u>ထ</u> .	
Typed or printed name of	signee		$\frac{\omega}{}$	