

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

LO100 DD18690

Merit Title Agency, LLC

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****155.00 ****155.00

RECEIVED

01 OCT 30 AM 10:54

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Signature _____

Requested by: SB

Name _____

Date 10/30/01

Time 10:30

Walk-In _____

Will Pick Up _____

____ Art of Inc. File

____ LTD Partnership File

____ Foreign Corp. File

☒ L.C. File

____ Fictitious Name File

____ Trade/Service Mark

____ Merger File

____ Art. of Amend. File

____ RA Resignation

____ Dissolution / Withdrawal

____ Annual Report / Reinstatement

☒ Cert. Copy

____ Photo Copy

____ Certificate of Good Standing

____ Certificate of Status

____ Certificate of Fictitious Name

____ Corp Record Search

____ Officer Search

____ Fictitious Search

____ Fictitious Owner Search

____ Vehicle Search

____ Driving Record

____ UCC 1 or 3 File

____ UCC 11 Search

____ UCC 11 Retrieval

____ Courier

01 OCT 30 AM 11:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UB
10-30-01

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY**

ARTICLE I – Name:

The name of the Limited Liability Company shall be **Merit Title Agency, LLC**

ARTICLE II – Address and Place of Business:

The mailing address and principal place of business for the limited liability Company shall be **Merit Title Agency, LLC, 10138 U.S. 19 Port Richey, Fl. 34668**

**ARTICLE III – Registered Agent, Registered Office & Registered Agent's
Signature:**

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

Lucy Dwyer
10138 U.S. 19
Port Richey, Florida 34668

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..

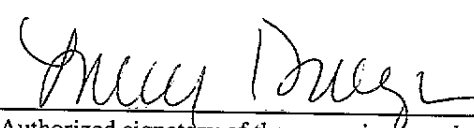

Registered Agent's Signature

ARTICLE IV – Management

The Limited Liability Company is to a manager – managed company. The Manager's name and address: **KeyStone Title Agency, Inc. 10138 U.S. 19 Port Richey, Fl 34668**

ARTICLE V – Effective Date

No effective date


Authorized signatory of the managing member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Lucy Dwyer

SECRETARY OF STATE
ALL CHARGES SET 11/08/06

01 OCT 30 AM 11:35

AFFIDAVIT
AND
RETURN