Where Quality, Service and Professionalism Always Come First

March 15, 2002

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

03/18/02--01067--021 ****160.00 ****160.00

Dear Sirs:

Enclosed please find our application and payment for the Articles of Organization for a Limited Liability Company. Should you have any questions please contact the following person(s):

> Robert W. Archie, Managing Partner William H. Johnson, Managing Partner Titlecorp of Florida 398 Freeman Street Longwood, FL 32750 (407) 629-7070

Thank you for your assistance in this matter.

Sincerely

Robert W. Archie Managing Partner

Titlecorp of Florida

DOC. EXAM

J. BRYAN MAR 2 2 2002

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Titlecorp OF Florisa/Century 21 REAL ESTATE TROY
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
398 FREENIAN STREET CONGWOOD FC 32750
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature
The name and the Florida street address of the registered agent are:
Robert Archie 860 110
398 FREE MAN STREET TOP IN
Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable)
City, State, and Zip
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.)
The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.
therefore, a manager - managed company.
(An additional article must be added if an effective date is requested)
Signature of a member of an authorized representative of a 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.)
William H Lourson
Typed or printed name of signee

FILING FEES:
\$ 100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)
\$ 5.00 Certificate of Status (OPTIONAL)