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ACCOUNT NO. : 072100000032

REFERENCE : 733660 5674A

AUTHORIZATION : *Patricia Pigato*

COST LIMIT : \$ 155.00

ORDER DATE : September 5, 2002

ORDER TIME : 8:34 AM

ORDER NO. : 733660-005

300007562513--4

CUSTOMER NO: 5674A

CUSTOMER: Robert C. Burke, Jr., Esq
Kimpton, Burke & Bobenhausen,
P.a.
Suite 100
28059 U.s. Highway 19, North
Clearwater, FL 33761-2698

DOMESTIC FILING

NAME: 1ST CHOICE TITLE AGENCY, LLC

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: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS:

[Handwritten initials]

APPROVED
AND
FILED
02 SEP -6 PM 1:22
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 SEP -6 AM 10:30
DIVISION OF CORPORATION

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

ARTICLE I – Name:

The name of the Limited Liability Company shall be 1st Choice 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 1st Choice 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:

Margaret L. Dwyer

10138 U.S. 19

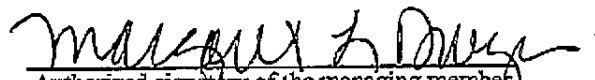
Port Richey, Florida 34668

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 a manager – managed company. The Manager's name and address: KeyStone Title Agency, Inc. 10138 U.S. 19 Port Richey, FL 34668


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.)

Margaret L. Dwyer

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 SEP - 6 PM 1:22

APPROVED
AND
FILED