

Division of Corporations

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# LO20000032728

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 205-0383

From: Account Name : SHUMAKER, LOOP & KENDRICK LLP  
Account Number : 075500004387  
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Fax Number : (813) 229-1860

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## LIMITED LIABILITY COMPANY

LIBERTY TRUST TITLE, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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DIVISION OF CORPORATION

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**ARTICLES OF ORGANIZATION  
LIBERTY TRUST TITLE, LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is **LIBERTY TRUST TITLE, LLC**

**ARTICLE II - Address:**

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

7305 West Sample Road  
Suite #104  
Coral Springs, Florida 33065

**ARTICLE III - Management:**

The Limited Liability Company is to be managed by a manager or managers.

IN WITNESS WHEREOF, I have signed these Articles of Organization as a member and acknowledged them to be my act this 5<sup>th</sup> day of December 2002.



**Signature of a member or 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.)

Doreen J. Jobbitt

**Typed or printed name of signer**

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is **LIBERTY TRUST TITLE, LLC**
2. The name and the Florida street address of the registered agent are:

Doreen J. Jobbitt  
7305 West Sample Road  
Suite #104  
Coral Springs, Florida 33065

*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.*

  
Signature

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