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## 103000005766

Boolet W. Archic (Requestor's Name)
398 Freeman St. (Address)
Longund Pl 32750
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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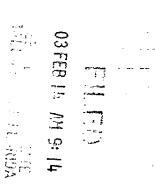
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02/14/03-01053-010 \*\*160.00

MJH



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
TITLECORD OF FloRIDG G PITZER LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:  398 FRECMAN ST. CONGWOO FC. 32750
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Kobert W. Archic
398 FREENAN ST.
Florida street address (P.O. Box NOT acceptable)
Congwood FL 32750 City, State, and Zip
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 fumiliar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.  Registered Agent's Signature
(An additional article must be added if an effective date is requested)
(An additional article must be added if air effective date is requested)
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.)
William H. JOHNSON
Typed or printed name of signce
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)