## DD016596 Florida Department of State

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Division of Corporations

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From:

Account Name : ACCOUNTING & BEYOND

Account Number : T19990000223 : (813)998-9800 Phone Fax Number : (813)935-9982

LIMITED LIABILITY COMPANY

Madison Title & Trust, LLC

Certificate of Status	0
Certified Copy	11
Page Count	01
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DIVISION OF CORPORATION

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. Name: The name of the Limited Liability Company is:		
Madison Title & Trust, LLC	]	
ARTICLE II- Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
3837 North Dale Boulevard, Suite 379, Tampa	J	
ARTICLE III Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:		
Robert Mackinnon Name	<del>-</del> .	
·· <del>·</del>		
3837 North Dale Boulevard, Suite 379 Florida Street Address	-	
Tampa, Flurida 33624		
City, State and ZIP	_	
Having been named as registered agent and to accept service of process for the above stated limited company at the place designated in this certificate, I hereby accept the appointment as registered age to act in this capacity. I further agree to comply with the provisions of all standes relating to the processing performance of my duties, and I am familiar with and accept the obligations of my position agent as provided for in Chapter 608, F. S.	ent and agre oper and	
Told 15/6/03		چ
Signature/Registered Agent Date	and a second	
Article IV .Management (Check box if applicable.)	000 500 Common	613
The Limited Liability Company is to be managed by one manager or more managers and is, the manager managed company.	acfore, &	
Signature of a member or an authorized representative of a member.	<del>nd</del> .	,
(In accordance with section 606.408(3), Floride Stantes, the execution of this document co affirmation under the pumilties of perjury that the facts stated bearin are unse.)	natītuice an	
Robert Mackinnon	<b>-</b>	

Typed or printed name of signer

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