

**W03000027526**

Florida Department of State  
Division of Corporations  
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To:

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From:

Account Name : TEW & BEASLEY, L.L.P.  
Account Number : 073674003226  
Phone : (305) 536-1112  
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DIVISION OF CORPORATIONS

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**LIMITED LIABILITY COMPANY**

**Mortgage Solutions, L.L.C.**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

**W03-27526**  
*[Signature]*

**ARTICLES OF ORGANIZATION  
FOR  
MORTGAGE SOLUTIONS L.L.C.**

**ARTICLE I. - NAME:**

The name of this Limited Liability Company ("Company") shall be:

MORTGAGE SOLUTIONS L.L.C.

**ARTICLE II. - ADDRESS**

The mailing address and street address of the principal office of the Company is:  
11899 SW 41<sup>st</sup> Drive, Miami, Florida 33175

**ARTICLE III. - DURATION**

The period of duration for the Company shall be perpetual unless dissolved according to law.

**ARTICLE IV. - MANAGEMENT**

The Company is to be managed by: a manager or managers and the name(s) and address of such manager is:

Erika Vidal  
11899 SW 41<sup>st</sup> Drive  
Miami, Florida 33175

**ARTICLE V. - ADMISSION OF ADDITIONAL MEMBERS**

The right of the members to admit additional members and the terms and conditions of the admissions shall be: new members may be admitted from time to time and upon such terms and conditions as shall be determined by a unanimous vote of the holders of all of the Membership Interests.

ARTICLE VI. - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right of the members of the Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continual membership of a member in the Company shall be: determined by a unanimous vote of the remaining holders of all of the Membership Interests to continue to conduct the business of the Company under the Company's name.



\_\_\_\_\_  
Signature of a member or authorized representative of a member

Erika Vidal

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JUL 29 2003  
FLORENCE, FLORIDA

03 JUL 29 2003

FILED

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, 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: Mortgage Solutions L.L.C.
2. The name and the Florida street address of the registered agent are:

ERIKA VIDAL  
201 S. BISCAYNE BLVD. SUITE 2600  
MIAMI, FLORIDA 33131

*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