

LD30000 31367

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note:** Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000258503 9)))

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)205-0383

From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP  
Account Number : 075500004387  
Phone : (813)229-7600  
Fax Number : (813)229-1660

**LIMITED LIABILITY COMPANY**  
**ANCHOR TITLE PARTNERS, LLC**

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

03 AUG 21 PM 2:25  
SETTLED  
FILED  
FALL 2003  
FLORIDA

RECEIVED  
03 AUG 21 PM 2:24  
DIVISION OF CORPORATION

07-12-03

H03000258503 9

**ARTICLES OF ORGANIZATION  
ANCHOR TITLE PARTNERS, LLC**

**ARTICLE I – Name:**

The name of the Limited Liability Company is ANCHOR TITLE PARTNERS, LLC.

**ARTICLE II – Address:**

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

7819 North Dale Mabry Hwy.  
Suite 108  
Tampa, Florida 33614

**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 an authorized representative of a member and acknowledged them to be my act this 20<sup>th</sup> day of August 2003.



\_\_\_\_\_  
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.)

\_\_\_\_\_  
Michael H. Robbins

Typed or printed name of signer

FILED  
03 AUG 21 PM 2:25  
CLERK OF COURT  
H03000258503

H03000258503 9

H03000258503 9

**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 ANCHOR TITLE PARTNERS, LLC.
2. The name and the Florida street address of the registered agent are:

Michael H. Robbins  
Shumaker, Loop & Kendrick, LLP  
101 East Kennedy Blvd., Suite 2800  
Tampa, Florida 33602

*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

APPROVED  
FILED  
03 AUG 21 PM 2:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H03000258503 9