

AUG-22-03 FRI 8:59 AM

Division of Corporations

P. 1

Page 1 of 2

L030000 31480

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.

(((H03000259134 2)))

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 : (450)205-0383

From:
Account Name : FILINGS, INC.
Account Number : 072720000101
Phone : (850)385-6735
Fax Number : (954)641-4192

LIMITED LIABILITY COMPANY

NET TRUST MORTGAGE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

03 AUG 22 04:10:38
DIVISION OF CORPORATIONS

RECEIVED
03 AUG 22 04:10:09
DIVISION OF CORPORATIONS

827-03

AUG-22-03 FRI 8:59 AM

P. 2

HB3000259134

ARTICLES OF ORGANIZATION FOR NET TRUST MORTGAGE, LLC

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I - Name

The name of the Limited Liability Company is: NET TRUST MORTGAGE, LLC.

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is: 6618 Thornhill Court, Boca Raton, Florida 33433.

**ARTICLE III - Registered Agent,
Registered Office, and Registered Agent's Signature**

The name and the Florida street address of the registered agent are:

Benjamin P. Shenkman, Esq.
2160 W. Atlantic Ave., Second Floor
Delray Beach, Florida 33445

Having been named as registered agent 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 as provided for in Chapter 608, Florida Statutes.


Registered Agent's Signature

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 21st day of AUGUST, 2003.

(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)


Authorized Representative Signature

Printed Name: Benjamin P. Shenkman

HB3000259134

003000259134

**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:

NET TRUST MORTGAGE, LLC

2. The name and the Florida street address of the registered agent are:

**BENJAMIN P. SHENKMAN, ESQ.
2160 W. Atlantic Ave., Second Floor
Delray Beach, FL 33445**

Having been named as registered agent 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 as provided for in Chapter 608, Florida Statutes.


Registered Agent's Signature

003000259134

03 AUG 27 AM 10:38

003000259134