L03000034147

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.

(((H03000271545 3)))

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

EFFECTIVE DATE 9-10-03

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

From:
Account Name : ACCESS NOTARY SERVICES OF FLORIDA, INC.
Account Number : I20020000159
Phone : (305)321-2025
Fax Number : (305)445-8297

RECEIVED
03 SEP 10 AM 8:03
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Accord Management Services, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	$155.00

Electronic Filing Menu Corporate Filing Public Access Help

JB 9-10-03

1

H03000271545 3

ARTICLES OF ORGANIZATION FOR ACCORD MANAGEMENT SERVICES, L.L.C.

ARTICLE I

The name of the Limited Liability Company is: Accord Management Services, L.L.C.

EFFECTIVE DATE 9-9-03

ARTICLE II

The inception date of the limited liability company and the day it began operations is: September 9, 2003.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company is: 10000 W Bay Harbor Drive, #624, Bay Harbor Islands, FL 33154

ARTICLE IV

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

Peter G. Lynch
Name

10000 W Bay Harbor Drive, #624
Florida street address (P.O. Box NOT acceptable)

Bay Harbor Islands, FL 33154
City, State and Zip Code

Having been named 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 as provided for in Chapter 608, F.S.

Registered Agent's Signature

H03000271545 3

H03000271545 3

Signature of 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.)

Peter G. Lynch

Typed or printed name of signee

03 SEP -9 AM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA