

LO3000046248

(Requestor's Name)

KARL W. BOYLES, JR.
ATTORNEY AND COUNSELOR AT LAW
POST OFFICE BOX 13464
PENSACOLA, FLORIDA 32591-3464

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

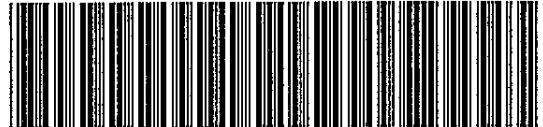
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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

HERITAGE TITLE LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

6915 HOLLAND ROAD

6915 HOLLAND ROAD

MILTON, FLORIDA 32583

MILTON, FLORIDA 32583

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

LORI L. DANIEL

Name

6915 HOLLAND ROAD

Florida street address (P.O. Box NOT acceptable)

MILTON

FLORIDA

City, State, and Zip

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TALLAHASSEE FLORIDA

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 as provided for in Chapter 608, Florida Statutes..

Lori L. Daniel

Registered Agent's Signature

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member

Name and Address:

MGRM

PAIGE JCNES

36 PECAN DRIVE

LONG BEACH, MS 39560

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

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.)

PAIGE JONES

Typed or printed name of signee

Filing Fees:

\$ 5.00 Certificate of Status (Optional)

ALLAHSEE FLORIDA

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