

L03000049309

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.

(((H03000328058 3)))

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 : 075300004387
Phone : (813) 229-7600
Fax Number : (813) 229-1660

03 DEC -3 PM 1:12
AND
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY

Complete Title of Cape Coral, LLC

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

RECEIVED
03 DEC -3 PM 1:21
DIVISION OF CORPORATION

Electronic Filing Menu

Corporate Filing

Public Access Help

12-30

H03000328058 3

**ARTICLES OF ORGANIZATION
COMPLETE TITLE OF CAPE CORAL, LLC**

ARTICLE I – Name:

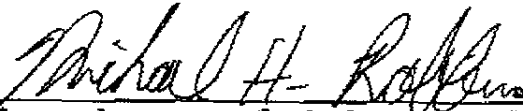
The name of the Limited Liability Company is COMPLETE TITLE OF CAPE CORAL, LLC.

ARTICLE II – Address:

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

2323 Del Prado Blvd.
Suite 8
Cape Coral, Florida 33990

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 2nd day of December, 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 signee

03 DEC - 3 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AND
FILED

H03000328058 3

H03000328058 3

**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 COMPLETE TITLE OF CAPE CORAL, 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

03 DEC -3 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

H03000328058 3