## · W4000035710

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## TRANSMITTAL LETTER

UBJECT:	The Title Firm, LLC
	(Name of Limited Liability Company)
he enclosed Artic	cles of Organization and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following:
_	Andre N. Smith
_	(Name of Person)
	The Title Firm, LLC
	(Firm/Company)
	2920 NW 69 Avenue
	(Address)
	Margate / Florida 33063
	(City/State and Zip Code)

STREET ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The Title Firm, LI	LC	
ARTICLE II - Address: The mailing address and street addres	ss of the principal office of the Limi	ted Liability Company i
Principal Office Address:	Mailing Addre	ss:
2920 NW 69 Avenue	2920 NW 69 Ave	nue
Margate, FL 33063	Margate, FL 3306	<b>33</b> _
		gent's Signature:
ARTICLE III - Registered Agent, F		
The name and the Florida street addre		
The name and the Florida street addre	ess of the registered agent are:	04 <b>H</b>
The name and the Florida street addre	ess of the registered agent are:	04 HAY -3
The name and the Florida street address	ndre N. Smith  Name	04 HAY -3 AH
Ar	ess of the registered agent are:  ndre N. Smith  Name  0 NW 69 Avenue	04 HAY -3

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. Tfurther 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

Page 1 of 2 (CONTINUED)

## ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	•
MGRM	Andre Smith
-	2920 NW 69 Avenue
	Margate, FL 33063
MGR	Corliss Smith
	2920 NW 69 Avenue
	Margate, FL 33063
(Use attachment if necessary)	
NOTE: An additional article	must be added if an effective date is requested.
NOTE. An additional article	must be added if an effective date is requested.
REQUIRED SIGNATURE:	
	1:37 B
Signature of a memb	er or an authorized representative of a member.
(In accordance with see of this document consthat the facts stated he	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)
	Andre N. Smith
	vped or printed name of signee

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)