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

From:  
Account Name : STANTON AND GASDICK, P.A.  
Account Number : 075350000152  
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## LIMITED LIABILITY COMPANY

NEW HORIZONS FLORIDA MORTGAGE PARTNERS, LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION OF  
NEW HORIZONS FLORIDA MORTGAGE PARTNERS, LLC**

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

**ARTICLE I — Name:**

The name of the limited liability company (hereinafter referred to as the "Company") is "NEW HORIZONS FLORIDA MORTGAGE PARTNERS, LLC"

**ARTICLE II — Address:**

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

301 S. Orlando Avenue  
Winter Park, Florida 32789

**ARTICLE III — Registered Agent:**

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

Michael J. Gasdick, Esquire  
37 North Orange Avenue  
Suite 210  
Orlando, Florida 32801

**ARTICLE IV — Management:**

The Company is to be managed by members.

**ARTICLE V — Limitation on Agency Authority of Members:**

Pursuant to section 608.4235 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

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SECRETARY OF STATE  
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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 11 day of August, 2004.




Signature of authorized representative  
Michael J. Gasdick

(In accordance with section 608.408(3), Florida Statutes, the execution of this change constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT**

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



Signature of Registered Agent  
Michael J. Gasdick

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