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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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10/21/04--01027--015 **160.00

04 OCT 21 PM 2:35

John Lane
6714 Calistoga Circle
Port Orange, FL 32128
386-527-2688

04 OCT 21 PM 2:35
C. ALLEN (P) 833-1-AS

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Elite Title Company, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Lane

(Name of Person)

Elite Title Company, LLC

(Firm/Company)

3710 20th Street

(Address)

Vero Beach, Florida 32960

(City/State and Zip Code)

For further information concerning this matter, please call:

John Lane

(Name of Person)

at (386) 527-2688

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

STREET ADDRESS:
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

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RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Elite Title Company, LLC

ARTICLE II - Address:

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

Principal Office Address:

100 Cessna Blvd. Suite 1A
Daytona Beach, FL 32128

Mailing Address:

3710 20th Street
Vero Beach, FL 32960

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

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

John A. Lane

Name

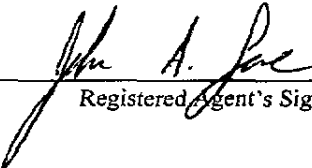
6714 Calistoga Circle

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

Port Orange, FL 32128

City, State, and Zip

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, F.S.,



Registered Agent's Signature

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

John A. Lane

6714 Calistoga Circle

Port Orange, FL 32128

MGRM

William C. Turner

3710 20th Street

Vero Beach, FL 32960

(Use attachment if necessary)

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.)

John A. Lane

Typed or printed name of signee

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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CLERK OF COURT
CLERK OF COURT