# pariment of State **Division of Corporations**

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To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

# LIMITED LIABILITY COMPANY

afico title & escrow services, llc

Certificate of Status	,	0	
Certified Copy		1	
Page Count		03	
Estimated Charge	\$	\$155.00	





## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

AFICO Title & Escrow Services, LLC

### ARTICLE II - Address:

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

299 Alhambra Circle Suite 403 Coral Gables, Florida 33134

#### ARTICLE III- Duration:

The period of duration for the Limited Liability Company shall be perpetual.

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

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

Jorge E. Rodriguez

Name

299 Alhambra Gircle, Suite 403

Fiorida street address (P.O. Box Not acceptable)

Corel Gables, Florida 33134

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

HO500011164110

## ARTICLE V - Management (Check if applicable)

X The Limited Liability Company is to be managed by the Manager(s) and the name(s) and address(es) of the Managers is/are:

Jorge E. Rodriguez 299 Alhambra Circle Suite 403 Coral Gables, Florida 33134

Antonio Menendez, Sr. 299 Alhambra Circle Suite 403 Coral Gables, Florida 33134

(An additional article must be added if an effective date is requested)

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 the penalties of perjury that the facts stated trerein are true.)

Jorge E, Rodriguez
Typed or printed name of signee

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