

Division of Corporations

H05000128216

L05000051315

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.

((H05000128216 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 : PROSKAUER ROSE LLP  
Account Number : 074673001063  
Phone : (561)995-4751  
Fax Number : (561)241-7145

RECEIVED  
05 MAY 23 AM 11:07  
DIVISION OF CORPORATION

05 APR 25 AM 9:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

LIMITED LIABILITY COMPANY  
ALLIANCE SETTLEMENT HOLDINGS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

H05000128216

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is **ALLIANCE SETTLEMENT HOLDINGS, LLC.**

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is 201 Broadway, Bayonne, NJ 07002..

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

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

NRAI Services, Inc.

Name

2731 Executive Park Drive, Suite 4

Florida street address

Weston, FL 33331

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.*

*By: Lipe R. Davis, Jr.*  
Registered Agent's 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.)

Andrew D. Levy, Esq.

Typed or printed name of signer

**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)

**FILED**  
05 APR 25 AM 9:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA