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LIMITED LIABILITY COMPANY

MAJOR TITLE COMPANY, LLC.

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MARQUEZ & MARCELO-ROBAINA, P.A.

6303 BLUE LAGOON DRIVE - SUITE 390 MIAMI, FLORIDA 33126-6005 TELEPHONE: (305) 262-2206 FACSIMILE NO: (305) 262-2282 E-mail: mmrlay@bellsouth.net

AUGUST 11, 2005

PLEASE DELIVER THIS FACSIMILE TRANSMISSION TO:

TO:

DIVISION OF CORPORATIONS

FAX No.

(850) 205-0383

FROM:

MARQUEZ & MARCELO-ROBAINA, P.A.

CLIENT:

MAJOR TITLE COMPANY, LLC.

REFERENCE:

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Fax audit No. H05000192330

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FAX AUDIT No. H05000192330

707000192330	TRANSMIT	TAL LETTER	•	
TO: Registration Sect Division of Corp		•	. •	,
SUBJECT: MAJO	R TITLE COMPANY, LL	.c.		
		d Liability Company)		
	(a)		•	
The enclosed Articles of (Organization and fee(s) are s	ubmitted for filing.		
Please return all correspon	ndence concerning this matte	er to the following:		
· .	MAGDA MAR	CELO-ROBAINA, Esq.		
	. 0	Name of Person)		
		•	•	
•				
		RCELO-ROBAINA, P.A.	, , , , , , , , , , , , , , , , , , ,	
	. (Firm/Company)		
	· cons pure l'Ar	GOON DRIVE, SUITE 390		-
*	0300 BLUE LAN	(Address)	-	ÄΫ́
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•	MIAML FLO	RIDA 33126-6005	<u>.</u>	经宝
-		State and Zip Code)	· · · · · · · · · · · · ·	ijĢ.
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For further information co	ncerning this matter, please	call:	, , ,	温温が
MAGDA MARCELO-F	ROBAINA	at (305) 262-2206		
(Name of		(Area Code & Daytime To	lephone Number)	
Enclosed is a check for	the following amount:	,		
	6 \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of State Certified Copy	15 &
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	laines Street see, Plorida 32399	P.O. Box 6327 Tallshassee, F		
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FAX AUDIT No. H05Q00192330

FAX AUDIT No. H05000192330

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	
MAJOR TITLE COMPANY, LLC.	
	•
ARTICLE II - Address:	winging after Y imited Tightlity Company in
The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6303 BLUE LAGOON DRIVE	6303 BLUE LAGOON DRIVE
SUITE 390	SUITE 390
MIAMI, FLORIDA 33126-6005	MIAMI, FLORIDA 33126-6005
ARTICLE III - Registered Agent, Registere	d Office, & Registered Agent's Signature:
The name and the Florida street address of the	registered agent are:
MAGDA MARCEL	O-ROBAINA SE
Name	
6303 BLUE LAGOO	ON DRIVE, SUITE 390
Florida street ad	idress (P.O. Box NOT acceptable)
· MIAMI	FL 33126-6005
City, State,	and Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all verformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S

· (CONTINUED)

Registered Agent Signature

Page 1 of 2.

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

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

naging Member	MAGDA MARCELO-ROBAINA, P.A.
	6303 BLUE LAGOON DRIVE, SUITE 390 MIAMI, FLORIDA 33126-6005
ANAGER	FOURBZ CORP.
· ·	8900 SW 117th Avenue - Suite C-101 MIAMI, FLORIDA 33186
•	
•	
<u> </u>	

REQUIRED SIGNATURE:

Signature of a member or an approprized representative of a member.

(In accordance with section 508.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Macda Marcelo-Robaina

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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