

Division of Corporations

L05000079592

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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Account Name : EXPRESS CORPORATE FILING SERVICE INC.
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LIMITED LIABILITY COMPANY

SELECTIVE TITLE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

2005 AUG 11 A 10:50

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

August 11, 2005

EXPRESS CORPORATE FILING SERVICE INC.

SUBJECT: SELECTIVE TITLE, LLC
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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The document is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 82314

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2005 JUN 11 A 10:50

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY STATE
FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

SELECTIVE TITLE, LLC

ARTICLE II - Address:

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

Principal Office Address:

10625 SW 139 CT
MIAMI FL 33186

Mailing Address:

10625 SW 139 CT
MIAMI FL 33186

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

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

TERESITA F. IZQUIERDO

Name

10625 SW 139 CT

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


MIAMI

FL

33186

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)

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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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

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CLERK OF THE COURT
TALLAHASSEE, FLORIDA

MGRM

ALAIN VILLAR

148 IROQUOIS

MIAMI SPRINGS FL 33166

MGRM

STEPHANIE PORTA

10625 SW 139 CT

MIAMI FL 33186

MGRM

TERESITA F. IZQUIERDO

10625 SW 139 CT

MIAMI FL 33186

(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.)

TERESITA F. IZQUIERDO

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)