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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 3, 2005

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: MOORE MORTGAGE HOLDINGS PARTNERSHIP #1, LLC

Ref. Number: W05000045529

We have received your document for MOORE MORTGAGE HOLDINGS PARTNERSHIP #1, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$155.00 payment.

Florida LLC's may not use the word "PARTNERSHIP" in their names.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist

Letter Number: 505A00059954

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### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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#### ARTICLES OF ORGANIZATION

OF

## TELEPHONE ON THE STATE OF THE S **MOORE MORTGAGE HOLDINGS PARTNERS #1, LLC**

Each undersigned individual, being either a member or the authorized representative of a member, hereby presents these Articles of Organization to the Department of State of the State of Florida in accordance with Chapter 608, Florida Statutes, for the formation of a limited liability company under the laws of the State of Florida.

#### ARTICLE I

The name of the limited liability company (the "Company") is: MOORE MORTGAGE HOLDINGS PARTNERS #1, LLC

#### ARTICLE II

Unless and until the Company is dissolved by the unanimous consent of the members or by law, the Company will exist in perpetuity from the date of the filing of these Articles with the Florida Department of State,

#### **ARTICLE III**

The mailing address and street address of the Company's principal business office is:

> 2601 South Bayshore Drive Suite 2040 Coconut Grove, Florida 33133

#### **ARTICLE IV**

The name of the initial registered agent and the street address of the initial registered office for service of process in the State of Florida are as follows. Attached to these Articles is a written statement from the registered agent as required by Florida Statute § 608.415.

Registered Agent

Address of Registered Office

Harold L. Lewis

One Biscayne Tower, Suite 2400 2 South Biscayne Boulevard Miami, Florida 33131

#### **ARTICLE V**

The business of the Company shall be managed by one or more members. The Company shall be a member-managed Company. The initial managing members will be:

Timothy Moore

Suite 2040

Nathan Moore

James Moore

2601 South Bayshore Dr.

2601 South Bayshore Dr.

2601 South Bayshore Dr.

Suite 2040

Suite 2040

Coconut Grove, Florida 33133 Coconut Grove, Florida 33133 Coconut Grove, Florida 33133

#### ARTICLE VI

The Company may exercise any powers, without limitation whatsoever, which a limited liability company may legally exercise under the laws of the State of Florida.

#### **ARTICLE VII**

The Company may indemnify any manager, member, officer, employee or agent of the Company to the fullest extent permitted by Florida law.

IN WITNESS WHEREOF, the undersigned authorized representative of the Company has hereunto executed these Articles of Organization this 20 day of September 2005.

Harold

Lewi**š**,

Authorized

Representative

#### **ACCEPTANCE OF REGISTERED AGENT**

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.

Harold L. Lewis