

L05000097606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

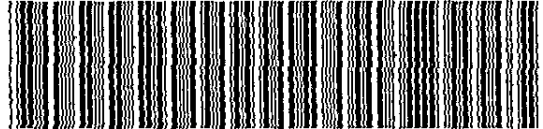
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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EFFECTIVE DATE

9-27-05

09/30/05--01040--014 \*\*160.00

FILED  
05 SEP 30 AM 10:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch OCT 04 2005

**J. MICHAEL HAYGOOD, P.A.**  
ATTORNEY AT LAW

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1555 PALM BEACH LAKES BLVD.  
SUITE 1510  
WEST PALM BEACH, FL 33401

MAILING ADDRESS:  
P.O. BOX 3183  
WEST PALM BEACH, FL 33402-3183  
TEL: 561.684.8399  
FAX: 561.471.8055  
E-MAIL: HAYGOOD@BELLSOUTH.NET

VIA FEDERAL EXPRESS

September 29, 2005

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Freshwater Title and Escrow Services, LLC

Dear Sir or Madam:

The enclosed Articles of Organization and fees are submitted for filing.  
A check in the amount of \$160.00 is enclosed for filing fees, certificate of  
status and certified copy.

Please return all correspondence concerning this matter to the  
following:

J. Michael Haygood  
J. Michael Haygood, P.A.  
P.O. Box 3183  
West Palm Beach, FL 33402

For further information concerning this matter, please call:

J. Michael Haygood at 561-684-8399

Sincerely yours,

J. Michael Haygood

Enclosure

Cc: Stephanie Harris

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

FRESHWATER TITLE AND ESCROW SERVICES, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

### ARTICLE II - Address:

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

#### Principal Office Address:

#### Mailing Address:

1639 FORUM PLACE

SAME

SUITE 4

EFFECTIVE DATE

WEST PALM BEACH, FL 33401

9-27-05

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

J. MICHAEL HAYGOOD, P.A.

Name

1639 FORUM PLACE, SUITE 4

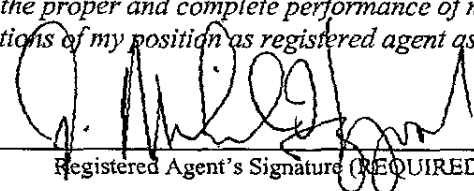
Florida street address (P.O. Box **NOT** acceptable)

WEST PALM BEACH, FL 33401

City, State, and Zip

FILED  
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TALLAHASSEE, FLORIDA

*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 (REQUIRED)

(CONTINUED)

Page 1 of 2

**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:**

MGRM

J. MICHAEL HAYGOOD, P.A.

1639 FORUM PLACE, SUITE 4

WEST PALM BEACH, FL 33401

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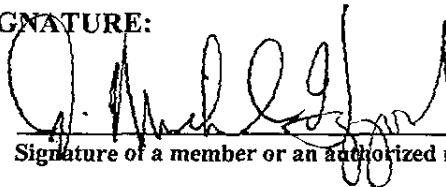
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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: SEPTEMBER 27, 2005 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

J. MICHAEL HAYGOOD

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)**