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### Florida Department of State

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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

#### FLALAND SOURCES, LLC

Certificate of Status	0
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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabili	ity Company is:	
FLALAND SOURCES, LLC		·
(Must end with the words "Limited Liabili	ity Company, "Limited Company" or their abbreviation "LLC," or "L	.C.,")
ARTICLE II - Address: The mailing address and street a	address of the principal office of the Limited Liability	y Company is:
Principal Office Address:	Mailing Address:	
9165 PARK DRIVE	9165 PARK DRIVE	
STE: 8	STE: 8	
MIAMI SHORES, FL 33138	MIAMI SHORES, FL 33138	<u> </u>
business entity with an active Florida reg	erve as its own Registered Agent. You must designate an individual or gistration.)  address of the registered agent are:  ESTIME-THOMPSON, P.A.	ature: STATE
	Name	E WE
	9165 PARK DRIVE STE: 8	
	Florida street address (P.O. Box NOT acceptable)	
1	MIAMI SHORES FL 33138	
	City, State, and Zip	
liability company at the place registered agent and agree to ac statutes relating to the proper	red agent and to accept service of process for the above the designated in this certificate, I hereby accept the app ct in this capacity. I further agree to comply with the p and complete performance of my duties, and I am fami position as registered agent as provided for th Chapte	ointment as vrovisions of all lliar with and

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

(((H06000006755)))

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

<u>Title:</u> "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member			
MGRM	FIRST LOAN SOLUTIONS, INC.		
	9185 PARK DRIVE STE: 8		
	MIAMI SHORES, FL 33138		
MGRM	WILDA DUGAR		
	9165 PARK DRIVE STE: 8		
	MIAMI SHORES, FL 33138		
MGRM	SUSETTE LOUIMA 9165 PARK DRIVE STE: 8 MIAMI SHORES, FL 33138	SEC.	NO ON FIRE
MGRM	DECIUS DERILUS	<u></u>	-
	9165 PARK DRIVE STE: 8		
	MIAMI SHORES, FL 33138		
(Use attachment if necessary)		ILCO'IL	Art 10: 30
CLE V: Effective date, if other than the	he date of filing:	(OPTIONAL)	
effective date is listed, the date must	be specific and cannot be more than	i five business days pr	ior

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.)

ANNA MOMPREMIER
Typed or printed name of signee

**Filing Fees:** 

\$125.96 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.09 Certified Copy (Optional)
\$ 5.09 Certificate of Status (Optional)

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#### (((H06000006755)))

MGRM KANSAS DERILUS

9165 PARK DRIVE STE: 8 MIAMI SHORES, FL 33138

MGRM MADELEINE FORTULUS

9165 PARK DRIVE STE: 8

MIAMI SHORES, FL 33138

MGRM PAUL GEORGES

9165 PARK DRIVE STE: 8 MIAMI SHORES, FL 33138

MGRM ORIUS FRAIDE

9165 PARK DRIVE STE: 8 MIAMI SHORES, FL 33138

MGRM CHURCHILL TOUSSAINT

9165 PARK DRIVE STE: 8 MIAMI SHORES, FL 33138

MGRM FOCH MOMPREMIER

9165 PARK DRIVE STE: 8 MIAMI SHORES, FL 33138

MGRM ANNA MOMPREMIER

9165 PARK DRIVE STE: 8 MIAMI SHORES, FL 33138

10 AN 10: