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Law Offices
BEDSOLE AND CONNER

7 Old Mission Avenue
St. Augustine, Florida 32084

(904) 829-8611
Telecopier (904) 829-9510

JAMES E. BEDSOLE, P.A.
ROBIN H. CONNER, P.A.

CHARLES R. BENNETT
(Dec. 1996)

January 5, 2006

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

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SUBJECT: LATIN AMERICAN ESCROW SERVICES, L.L.C.

Enclosed is an original and one copy of the articles of organization and a check for:

<input type="checkbox"/> \$125.00	<input checked="" type="checkbox"/> \$130.00	<input type="checkbox"/> \$155.00	<input type="checkbox"/> \$160.00
Filing Fee	Filing Fee,	Filing Fee,	Filing Fee,
and Registered	Registered Agent	Registered Agent	Registered Agent
Agent	Designation, and	Designation, and	Designation,
Designation	Certificate of Status	Certified Copy	Certified Copy, and
			Certificate of Status

Please return all correspondence concerning this matter to the following:

Robin H. Conner, Esq
Bedsole and Conner
7 Old Mission Avenue
St. Augustine, Florida 32084
Tel. 904-829-8611
Fax 904-829-9510

**ARTICLES OF ORGANIZATION
OF
LATIN AMERICAN ESCROW SERVICES, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be LATIN AMERICAN ESCROW SERVICES, LLC.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the company is 22 Linda Mar Drive, St. Augustine, Florida 32080.

ARTICLE III

REGISTERED AGENT, OFFICE AND AGENT'S SIGNATURE

The name and street address of the registered agent of the company in the state of Florida are JAMES RODENGEN, 22 Linda Mar Drive, St. Augustine, Florida 32080

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 obligations of my position as registered agent as provided for in Chapter 608, F.S.



JAMES RODENGEN

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**ARTICLE IV
MANAGEMENT**

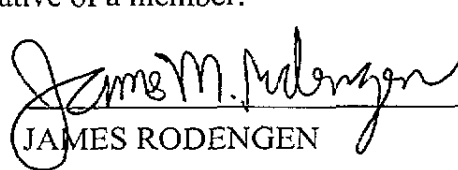
The company shall be a manager-managed company. The name and address of the manager is:

JAMES RODENGEN
22 Linda Mar Drive
St. Augustine, Florida 32080

ARTICLE V

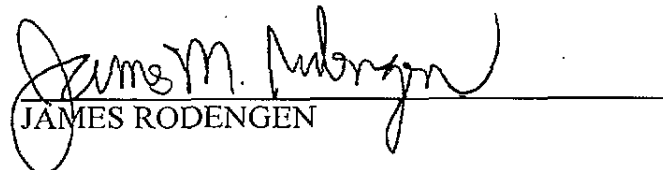
The effective date for this Limited Liability Company shall be:

Signature of member or an authorized representative of a member:


JAMES RODENGEN

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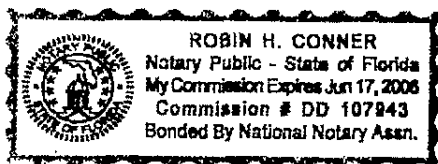
IN WITNESS WHEREOF, the undersigned member or authorized representative has made and subscribed these articles of organization at St. Augustine, Florida, on 22nd day of December, 2005.


JAMES RODENGEN

(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.)

STATE OF FLORIDA
COUNTY OF ST. JOHNS

Sworn to and subscribed before me this 22nd day of December, 2005 by JAMES RODENGEN who is personally known to me OR X produced identification.
Type of identification produced: Florida Drivers License




NOTARY PUBLIC: STATE OF FLORIDA

(Printed Name of Notary Public)

Commission Expires: _____