# L06000017479

(Requestor's Name)
(Address)
(Address)
(Oib (Chata 7) in (Dhan a 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
<del></del>
(Business Entity Name)
<b>(</b> )
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
opeoid: mandelions to 1 milg officer.
606AU00011459
Lin Daniel (4)7
1 606 600
Office Use Only
// ) /
//
H



200065358252

2006 FEB 16 AM 8: 44

RECEIVED

06 FEB 16 PH 4: 10

## FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302

1333 N. DUVAL STREET, TALLAHASSEE, FL 32303 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:	02-16-06	
NAME:	FIRST SOLUTION MORTGAGE OF TAMPA, LLC	THE THE PERSON
TYPE OF F	ILING: ARTICLES OF ORGANIZATION	ELORIDA G. 44
COST:	\$125	
RETURN:		
	/	
ACCOUNT	Γ: FCA000000015	

**AUTHORIZATION:** 

ABBIE/PA

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A DOTTON IS V. N.	
ARTICLE I - Name:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
The name of the Limited Liability Company is:	TALLER TO THE PARTY OF THE PART
First Solution Mortgage of Tampa, LLC	
(Must end with the words "Limited Liability Company, "Limit	ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the pr	rincipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
3696 Ulmerton Road	3696 Ulmerton Road
Suite 200	Suite 200
Clearwater, FL 33762	Clearwater, FL 33762
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
Jennifer Briana Sirmans	
Name	
3696 Ulmerton Road,S	uite 200
Florida street ad	dress (P.O. Box NOT acceptable)
Clearwater	FL 33762
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 (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:

MGRM	First Solution Mortgage Holdings, LLC	
	3350 NW Boca Raton Blvd., Suite A26	
	Boca Raton, FL 33431	
Use attachment if necessary)		
LEV: Effective date, if other than the	date of filing; N/A	

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.)

Louis Michael Gendason, Member of First Solution Mortgage Holdings, LLC
Typed or printed name of signee

#### Filing Fees:

\$125.90 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)