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M. HODGE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Preferred Title Services, LLC (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
David E. Menet		
(Name of Person)		
Salter, Feiber, Murphy, Hutson & Menet, P.A.		
(Firm/Company)		
P.O. Box 357399		
(Address)		
Gainesville, FL 32635-7399		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
David E. Menet at (352) 376-8201		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\sqrt{\sq}}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}} } \end{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}} \		
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compan	ıy is:
Preferred Title 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 t	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3940 NW 16th Blvd., Bldg B	P.O. Box 357399
Gainesville, FL 32605	Gainesville, FL 32635-7399
ARTICLE III - Registered Agent, Regis	tered Office, & Registered Agent's Signature:
	Registered Agent. You must designate an individual or another
The name and the Florida street address of	the registered agent are:
David E. Menet	96
1	Name ., Bldg B eet address (P.O. Box NOT acceptable)
3940 NW 16th Blvd., Bldg B	
Florida street address (P.O. Box NOT acceptable)	
Gainesville, FL 32605	<u> </u>
Cîty, State, and Zip	
liability company at the place designate registered agent and agree to act in this ca statutes relating to the proper and comple	nd to accept service of process for the above Stated limited and in this certificate, I hereby accept the appointment as epacity. I further agree to comply with the provisions of all ete performance of my duties, and I am familiar with and a registered agent as provided for in Chapter 608, F.S
777	
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:
MGR	Salter, Feiber, Murphy, Hutson & Menet, P.A. 3940 NW 16th Blvd., Bldg B Gainesville, FL 32605
(I lea attachment if necessary)	
	late of filing: (OPTIONAL) specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a member	or an authorized representative of a member.
(In accordance with sect	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury
David E. Menet	ed 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)