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SECRETARY OF STATE SECRETARY OF CORPORATIONS

3. SRYAK OCT 1 6 2006

COVER LETTER

TO: Registration Section Division of Corporations	:
SUBJECT: River's Edge Title, LLC (Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	٠
Please return all correspondence concerning this matter to the following:	-
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Debovah L. Hammons (Name of Person) 200 2	3
River's Edge Title, LLC = \$	11
655. W. Morse Blvd, Suite 112	-
Winter Park, FL 32789 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Deborah L. Hammons at (407) 629-5533 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \$\bigcup \\$155.00 Filing Fee & \$\bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FI	CORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	Title, LLC =
River's Edge (Must end with the words "Limited Liability Company, "Limited	Title, uc ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the particle.	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
655. W. Morse Blvd. Suite 113 Winter Park, EL 32789	655 W. Morse Blud. Suite 112 Winter Park FL 32789
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	l Office, & Registered Agent's Signature: tered Agent. You must designate an individual or another
The name and the Florida street address of the	registered agent are;
Name	L. Hammons
655. W. Mors Florida street ad	e Blud. Suite 112 dress (P.O. Box NOT acceptable)
Winter Par City, State,	K _{FL} 32789 and Zip
liability company at the place designated in a registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regional acceptance.	accept service of process for the above stated limited this certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S
Registered Agent's Signa	mire (KEQUIKED)

(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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member WGR	Liberty Title Company 655. W. Morse Blud. Suite 113
M GRM	H+H Tryestments, LLC 3815 No. Hwy 1, Suite 122
 -	OC OC CENTRAL SECTION OF THE SECTION
	T -9 PM
(Use attachment if necessary)	STATE RATIONS 2: 14
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	e of filing:(OPTIONAL) ecific 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 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.)

Debovah L. Hammons 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)