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## Florida Department of State

Division of Corporations

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## To:

Division of Corporations

Fax Number : (950)205-0383

## From:

Account Name : THOMAS M. CLARK, P.A.

Account Number : 072100000445

Phone : (954)776-3800

Fax Number : (954)776-3825

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**FLORIDA/FOREIGN LIMITED LIABILITY CO****Escrow Management, LLC**

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**ARTICLES OF ORGANIZATION  
OF  
ESCROW MANAGEMENT, LLC**

**ARTICLE ONE**

The name of this limited liability company shall be ESCROW MANAGEMENT, LLC.

**ARTICLE TWO**

The period of duration shall be perpetual.

**ARTICLE THREE**

This limited liability company is organized for the purpose of transacting any or all legal business.

**ARTICLE FOUR**

The street address of the principal office of this limited liability company and the mailing address of this limited liability company shall be 721 NE 3<sup>rd</sup> Avenue, Fort Lauderdale, Florida 33304. The initial registered agent shall be Thomas M. Clark, 2400 East Commercial Boulevard, Suite 820, Fort Lauderdale, Florida 33308.

**ARTICLE FIVE**

This limited liability company has at least two (2) members and the total amount of cash required to be contributed shall be \$100.00. There shall be no property other than cash contributed.

**ARTICLE SIX**

There shall be no additional contributions required to be made by the members.

**ARTICLE SEVEN**

There shall be no additional members of this limited liability company, except as provided by Amendment to these Articles of Organization.

**ARTICLE EIGHT**

The remaining members of this limited liability company shall have the right to continue the business of this limited liability company upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of any member or the occurrence of any other event which terminates the continued membership of a member in this limited liability company.

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#### ARTICLE NINE

This limited liability company shall not be managed by a manager or managers, but shall be operated by the members of the limited liability company. The names and addresses of the members of this limited liability company are as follows:

RALPH H. DOERING, III  
721 N.E. 3<sup>rd</sup> Avenue  
Fort Lauderdale, FL 33304

and

JOHN C. DOERING  
721 N.E. 3<sup>rd</sup> Avenue  
Fort Lauderdale, FL 33304

#### ARTICLE TEN

Each member of this limited liability company shall own an undivided fifty percent (50%) interest therein and each member shall contribute fifty percent (50%) of the cash contribution set forth hereinabove.

IN WITNESS WHEREOF, the undersigned authorized representative of the members has executed these Articles of Organization on the 10<sup>th</sup> day of July, 2007.

  
THOMAS M. CLARK

STATE OF FLORIDA }  
COUNTY OF BROWARD }

BEFORE ME, personally appeared THOMAS M. CLARK, to me well known and known to me to be the person described in, and who acknowledged to and before me that he executed said document for the purposes therein expressed.

WITNESS my hand and official seal this 10<sup>th</sup> day of July, 2007.

  
NOTARY PUBLIC

My Commission Expires:

(Notarial Seal)



Diane V. Hallaran  
Commission # DD347126  
Expires: SEP. 11, 2008  
Bonded Thru  
Atlantic Bonding Co., Inc.

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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE  
FOR THE SERVICE OF PROCESS WITHIN FLORIDA  
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED:

FIRST THAT ESCROW MANAGEMENT, LLC, DESIRING TO ORGANIZE OR QUALIFY UNDER  
THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE  
CITY OF FORT LAUDERDALE, STATE OF FLORIDA, HAS NAMED THOMAS M. CLARK, AT  
2400 EAST COMMERCIAL BOULEVARD, SUITE 820, FORT LAUDERDALE, FLORIDA, 33308,  
AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE:

  
THOMAS M. CLARK

TITLE: AUTHORIZED REPRESENTATIVE OF MEMBERS

DATE: JULY 10, 2007

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED  
LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I  
HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER ACCEPT TO COMPLY WITH  
THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE  
PERFORMANCE OF MY DUTIES.

SIGNATURE

  
THOMAS M. CLARK, REGISTERED AGENT

DATE: July 10, 2007

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