

**L07000103846**

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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

TRUST REPS, L.C.

## ARTICLE II - Address:

The address of the principal office and the mailing address of the Limited Liability Company are:

### Principal Office Address:

1612 SYDNEY DOVER RD.  
DOVER, FL 33527

### Mailing Address:

P. O. BOX 1508  
SEFFNER, FL 33583-1508

## ARTICLE III - Purpose:

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

## ARTICLE IV - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and Florida street address of the registered agent are:

L. T. S. C., LLC  
28 WEST PARK AVENUE  
LAKE WALES, FL 33859

*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.*

L.T.S.C., LLC, Registered Agent

By: Land Trust Service Corporation, Managing Member

By: \_\_\_\_\_

Mark Warda, President

## ARTICLE V - Name:

The effective date for this Limited Liability Company shall be October 10, 2007.

## Required Signature:

Signature of 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.)*

\_\_\_\_\_  
Mark Warda

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