# L08000057361

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



200130968602

OB JUN 11 AH 8: 46

B. KOHR

JUN 1 1 2008

DAWNER





ACCOUNT NO. : 07210000032

REFERENCE: 605260 4385116

AUTHORIZATION :

COSI LIMIT:

Smell de man

ORDER DATE: June 10, 2008

ORDER TIME : 4:35 PM

ORDER NO. : 605260-005

CUSTOMER NO: 4385116

DOMESTIC FILING

NAME: FORSALEBYOWNER.COM REFERRAL

SERVICES LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A DOMESTIC AND A DESCRIPTION OF THE PROPERTY O		
ARTICLE I - Name: The name of the Limited Liability Company is:	0	
The hame of the Limited Liability Company is.	LLC ity Company, "L.L.C.," or "LLC.") incipal office of the Limited Liability Company is:	
ForSaleByOwner.com Referral Services	LLC	
(Must end with the words "Limited Liabili	ity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
200 E. Las Olas Blvd.	ForSaleByOwner.com Referral Services LLC	
Fort Lauderdale, FL 33301-2293	Attn: Lynne Adamson c/o Publisher	
	200 E. Las Olas Blvd., Ft. Lauderdale, FL 3330	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registre business entity with an active Florida registration.)  The name and the Florida street address of the re  Corporation Service Corporation	ered Agent. You must designate an individual or another egistered agent are:	
Name		
1201 Hays Street		
Florida street address (P.O. Box NOT acceptable)		
Tallahassee	FL 32301	
City, State, and Zip		
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited as certificate, I hereby accept the appointment as  I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S	
BY: Mulguly F	Kimberly B. Moret as its agent	

(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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR Todd Siegel 21690 Abington Court Boca Raton, FL 33428 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing:

### **REQUIRED SIGNATURE:**

to or 90 days after the date of filing.)

nature of a member of an authorized representative of a member.

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

(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.)

Thomas S. Finke

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)