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SECRETARY OF STATE
TALLAHASSEE FLORIDA



COVER LETTER

TO: Registration Sect Division of Corpo				
_{subject:} Mineral	SUBJECT: Mineral City Title, LLC.			
	(Name of Limited Liability Company)			
The enclosed Articles of O	Organization and fee(s) are submitted for filing.			
Please return all correspond	dence concerning this matter to the following:			
W. Dougla	as Smith			
	(Name of Person)			
Mineral Ci	ity Title, LLC			
	(Firm/Company)			
63 San Ju	an Dr			
	(Address)			
Ponte Ved	dra Beach, Florida 32082			
	(City/State and Zip Code)			
For further information con	ncerning this matter, please call:			
W. Douglas Smith at 904 962.2401				
(Name of	Person) . (Area Code & Daytime Telephone	Number)		
Enclosed is a check for the	he following amount:			
\$125.00 Filing Fee	Certificate of Status Certified Copy Cert (additional copy is enclosed) Cert	0.00 Filing Fee, tificate of Status & tified Copy itional copy is enclosed)		
]]	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	EI	- Nam	e
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The name of the Limited Liability Company is:

Mineral City Title, (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
63 San Juan Dr	63 San Juan Dr	
Ponte Vedra Beach, Florida 32082	Ponte Vedra Beach, Florida 32082	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent, You must designate an individual or another

business entity with an active Florida registration.)

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

W. Douglas Smith

63 San Juan Dr

Florida street address (P.O. Box NOT acceptable)

Ponte Vedra Beach_{BL}Florida, 32082

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..

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:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	W. Douglas Smith
	63 San Juan Dr
	Ponte Vedra Beach, FL 32082
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·	·
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,	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than	the date of filing: October 29, 2008. (OPTIONAL)
If an effective date is listed, the date mu	st be specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	SEC SEC
REQUIRED SIGNATURE:	ember or an authorized representative of a member.
	SST
MI	Day S
Signature of a me	ember or an authorized representative of a member.
(In accordance with of this document of	th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury
	ted herein are true.)

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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

W. Douglas Smith

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee