

LO 90000087518

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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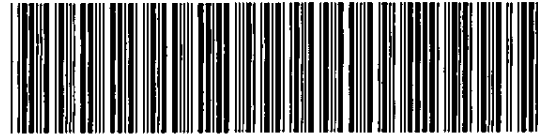
(Business Entity Name)

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR

SEP 11 2009

EXAMINER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 SEP 10 AM 9:20



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 121636 7653932

AUTHORIZATION :

COST LIMIT : \$ 125.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 SEP 10 AM 9:20

ORDER DATE : September 10, 2009

ORDER TIME : 3:17 PM

ORDER NO. : 121636-005

CUSTOMER NO: 7653932

DOMESTIC FILING

NAME: FLGAS, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap - EXT. 2951

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 SEP 10 AM 9:20

ARTICLE I
Name

The name of this Limited Liability Company is:

FLGAS, LLC.

ARTICLE II
Address

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

FLGAS, LLC
c/o National Loan Acquisitions Company
4004 Kruse Way Place, Suite 290
Lake Oswego OR 97035

ARTICLE III
Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

Juan Martinez
GrayRobinson, P.A.
1221 Brickell Avenue, Suite 1600
Miami, FL 33131

Having been appointed as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, I hereby accept this appointment and agree to serve this Limited Liability Company in this capacity. I am familiar with and accept the obligations of my position as the registered agent for this Limited Liability Company, as provided for in Chapter 608, Florida Statutes.


REGISTERED AGENT'S SIGNATURE

ARTICLE IV
Managing Member

This Limited Liability Company is to be managed by one Managing Member and is, therefore, a "member-managed" limited liability company.

The name and address of the initial Managing Member of this Limited Liability Company is as follows:

Name

Street Address

National Loan Acquisitions Company

4004 Kruse Way Place, Suite 290
Lake Oswego OR 97035

In accordance with Section 608.408(3), *Florida Statutes*, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.



AUTHORIZED REPRESENTATIVE'S SIGNATURE

JUAN MARTINEZ, AUTHORIZED REPRESENTATIVE

Type or printed name of signee

FILING FEES:

\$100.00 Filing Fee for Articles of Organization

\$25.00 Designation of Registered Agent

\$30.00 Certified Copy (OPTIONAL)

\$5.00 Certificate of Status (OPTIONAL)