

Division of Corporations

**L100600009738**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORPORATE OUTREACH  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

**L. SELLERS**

**JAN 27 2010**

**EXAMINER**

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**RECEIVED**

**10 JAN 26 PM 2:47**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**FLORIDA/FOREIGN LIMITED LIABILITY CO.  
PRESTIGE SETTLEMENT SERVICES LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge:	\$155.00

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**10 JAN 26 AM 11:01**

**FILED**

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

**PRESTIGE SETTLEMENT SERVICES 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:

2514 TAYLOR STREET, APT 12  
HOLLYWOOD FL 33020

2514 TAYLOR STREET, APT 12  
HOLLYWOOD FL 33020

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

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

**VANESSA OLMEDO**  
**2514 TAYLOR STREET, APT 12**  
**HOLLYWOOD FL 33024**

*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

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TALLAHASSEE, FLORIDA

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

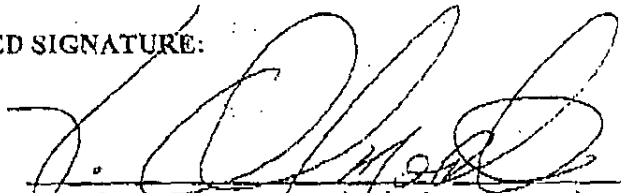
**Title: Name and Address:**

VANESSA OLMEDO-Managing Member  
2514 TAYLOR STREET, APT 12  
HOLLYWOOD FL 33024


**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**



Signature of a member or 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.)



Typed or printed name of signer

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