

Mar 01 2010 4:18

HP L6550E JET

p. 10

Division of Corporations

Page 1 of 1

L100000622673

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000046352 3)))



H100000463523ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6363

From:

Account Name : NATIONAL REGISTERED AGENTS, INC.
Account Number : I20030000062
Phone : (609) 716-0300
Fax Number : (609) 716-0820

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

Email Address: mgunn@gunnco.fas.com

FLORIDA/FOREIGN LIMITED LIABILITY CO.
GunnCo FNF, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

10 MAR - 1 AM 7:47

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

RECEIVED

10 MAR - 1 PM 1:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

T. HAMPTON

Help

MAR - 2 2010

<https://efile.sunbiz.org/scripts/efilcovr.exe>

3/1/2010

EXAMINER

((CH100000463523)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

GunnCo FNF, LLC

(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:4350 Pablo Professional CourtSuite 200Jacksonville, Florida 32224**Mailing Address:**4350 Pablo Professional CourtSuite 200Jacksonville, Florida 32224**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:

Marshall D. Gunn, Jr.

Name

4350 Pablo Professional Court, Suite 200Florida street address (P.O. Box Not acceptable)JacksonvilleFL 32224

City, State, and Zip

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.

Marshall D. Gunn, Jr.

By: 

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

((CH100000463523)))

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAR - 1 AM 7:57

$$((H1000004(3523)))$$

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member.

Name and Address:

MGRM

Kathleen Gunn

4350 Pablo Professional Court, Suite 200

Jacksonville, Florida 32224

MGRM

Marshall D. Gunn, Jr.

4350 Pablo Professional Court, Suite 200

Jacksonville, Florida 32224

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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:

Marcus J. [Signature]
Signature of a member or an authorized representative of the organization

(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.)

Marshall D. Gunn, Jr.

Typed or printed name of signer:

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAR - 1 AM 7:57

$$\cdot ((CH100000463523)))$$