# Electronic Articles of Organization For Florida Limited Liability Company

L10000028164 FILED 8:00 AM March 15, 2010 Sec. Of State Isellers

#### **Article I**

The name of the Limited Liability Company is: FLORIDA TITLE INSURANCE AFFILIATES, LLC

#### **Article II**

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

14001 N. DALE MABRY SUITE B TAMPA, FL. US 33618

The mailing address of the Limited Liability Company is:

14001 N. DALE MABRY SUITE B TAMPA, FL. US 33618

### **Article III**

The purpose for which this Limited Liability Company is organized is:

TO CONDUCT BUSINESS IN FLORIDA AS A REGISTERED TITLE INSURANCE AGENT BY ISSUING OWNERS TITLE INSURANCE POLICIES AND MORTGAGEE TITLE INSURANCE POLICIES TO BUYERS AND LENDERS RESPECTIVELY.

#### **Article IV**

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

BYRON G WILSON JR. 14001 N. DALE MABRY SUITE A TAMPA, FL. 33618

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.

Registered Agent Signature: BYRON GIBBS WILSON, JR.

## **Article V**

The name and address of managing members/managers are:

Title: MGR BYRON G WILSON JR. 14001 N. DALE MABRY, STE. A TAMPA, FL. 33618 US

Title: MGRM ALPHA-OMEGA TITLE SERVICES, INC. 14001 N. DALE MABRY, STE. A TAMPA, FL. 33618 US

## **Article VI**

The effective date for this Limited Liability Company shall be: 03/15/2010

Signature of member or an authorized representative of a member Signature: LORI WILSON

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