# LII00031745

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COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: Title Guaranty of Florida, LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Merrill A. Bookstein
Name of Person
Merrill A. Bookstein, Counselor at Law P.A.
Firm/Company
1900 Glades Road Suite 102
Address Boca Raton, FL 33331 City/State and Zip Code
City/State and Zip Code
For further information concerning this matter, please call:
Merrill A. Bookstein     at (561)     361-9454       Name of Person     Area Code & Daytime Telephone Number
Enclosed is a check for the following amount: \$125.00 Filing Fee \$\$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE I - Name:**

The name of the Limited Liability Company is:

## Title Guaranty of Florida, 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:Mailing Address:1900 Glades Road Suite 1021900 Glades Road Suite 102Boca Raton, FL 33431Boca Raton, FL 33431

## 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:	1 MAR ECREI
Merrill A. Bookstein	MAR 14 RETARY AHASSE
Name	SER F
1900 Glades Road Suite 102	
Florida street address (P.O. Box <b>NOT</b> acceptable)	FLOR
Boca Raton, <sub>FL</sub> 33431	RIDY SIDY

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.

Agent nature (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:

## Name and Address:

"MGR" = Manager "MGRM" = Managing Member

MGRM

Title:

Merrill A. Bookstein 1900 Glades Road Suite 102 Boca Raton, FL 33431

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(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.)

<b><u>REQUIRED</u> SIGNATURE:</b>	
Signature of a	nyember 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Merrill A. Bookstein

Typed or printed name of signee

## 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)