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From:

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FLORIDA LIMITED LIABILITY CO. SECURITY TITLE SFL, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: (Must end with the words Limited Liability Company, "LLC," or "LLC.")

SECURITY TITLE SFL, LLC

ARTICI	Æ	II -	Add	iress
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The mailing address and street address of the principal office of the Limited Liability Company is:

7480 SW 40TH STREET **SUITE 530** MIAMI, FL 33155

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered agent are: (The Limited Florida Street address of the registered Agent with an active Florida registration.)

> INGRID HILDA ORTA 1480 SW 40th Street Suite 530

Miami

The name and title of each person authorized to manage and control the Limited Liability Company:

(AMBR) INGRID HILDA ORTA

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Required Signatures:



Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), 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.

INGRID H ORTA

Typed or printed name of signee

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 605, F.S..

Registered Agent's Signature (REQUIRED)

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