

L16000159436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

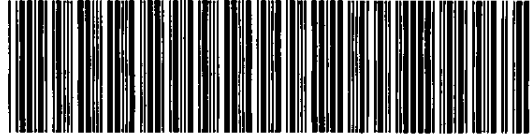
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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7/24
8/26/16

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Capital City Title 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:

R. Elliot D. Potter

Name of Person

Capital Law PA

Firm/Company

1276 Metropolitan Blvd Suite 305

Address

Tallahassee, FL 32312

City/State and Zip Code

elliott.potter@caplaw-fl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elliot Potter at (850) 692-3145
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,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32304

Articles of Organization
For
CAPITAL CITY TITLE, LLC.
(A Florida Limited Liability Company)

ARTICLE I
NAME

The name of the Limited Liability Company is: Capital City Title, LLC.

ARTICLE II
ADDRESS

The mailing address is: 1276 Metropolitan Blvd
Suite 305
Tallahassee, FL 32312

The street address is: 1276 Metropolitan Blvd
Suite 305A
Tallahassee, FL 32312

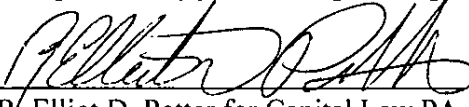
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ARTICLE III
REGISTERED AGENT

The initial registered agent shall accept service on behalf of the company at the place designated on this agreement and in its certificate of designation of registered agent. The registered agent for the company shall be:

CAPITAL LAW PA
1276 Metropolitan Blvd
Suite 305
Tallahassee, FL 32312

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.


R. Elliot D. Potter for Capital Law PA

**ARTICLE IV
MANAGEMENT**

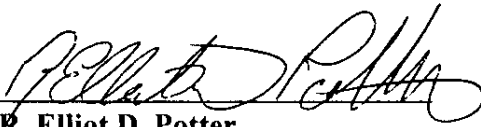
The company is to be managed by the authorized members:

R. Elliot D. Potter (AMBR)
1276 Metropolitan Blvd
Suite 305
Tallahassee, FL 32312

Stacey Maxwell (AMBR)
6806 Thomasville Road
Suite 5
Tallahassee, FL 32312

R. Elliot D. Potter and Stacey Maxwell are authorized members of the Company and shall be authorized to execute any and all reports, forms, instruments, documents, and contracts, including but not limited to deeds, bills of sale, transfers, promissory notes, mortgages or security agreements. The authorized members may transfer or encumber or incur debt or obligation on behalf of the company as are necessary, appropriate or beneficial to carry out the purpose of the company as delineated in the Operating Agreement.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.


R. Elliot D. Potter
Authorized Member

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TALLAHASSEE, FLORIDA

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