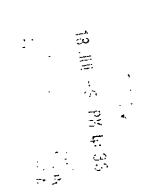
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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

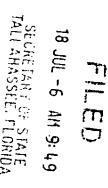
Office Use Only



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JUL 0 9 2018 T SCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

FLORIDA LAND	TITLE SERVI	CES, LLC	
			
			Art of Inc. File
•			LTD Partnership File
			Foreign Corp. File
			✓ L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art, of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			✓ Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
5.gnatare			Vehicle Search
			Driving Record
Requested by: BA Name	7/6/18	Time	UCC I or 3 File
	//0/18 Date		UCC Search
	Date		UCC 11 Retrieval

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:							
The name of the Limite	ed Liability Company is:						
Florida Lan	d Title Services, LLC						
(N	Aust contain the words "Limit	ed Liability Company	". "L.L.C.," or "LLC.")				
ARTICLE II - Addres	s:						
The mailing address and	l street address of the principa	l office of the Limited	d Liability Company is:				
	Principal Office Address:						
		Mailing Address:					
2323 S. Flor	232	2323 S. Florida Avenue					
Lakeland, Fl	Lak	Lakeland, Florida 33803					
							
ARTICLE III - Registe	red Agent, Registered Office	. & Registered Ages	it's Signature.				
(THE PHINGE PISOURY CO	ompany cannot serve as its ow	n Registered Agent 1	You must designate an i	ndividual or			
another business entity w	vith an active Florida registrat	ion.)		norvioual of			
The name and the Florida	street address of the registere	.d anast					
	servor and eas of the testatete	a agent are;					
	Richard A. Miller						
		Name					
	2323 S. Florida Ave	2323 S. Florida Avenue					
		Florida street address (P.O. Box NOT acceptable)					
	Lakeland	Florida	33803				
	City	State	Zip				
Umrium kaan ar			*				
ciuving neen namea as regis. Place designated in this cart	tered agent and to accept servi	ce of process for the c	bove stated limited liabi	ility company at the			
THE THE MET CO ID COMPLY WITH	ficate, I hereby accept the appo the provisions of all statutes re	UMING IN IBD DECEDED A	and an eventure of				
am familiar with and accept t	the obligations of my position of	as registered agent as	na complete performance provided for in Chanter	e of my duties, and I			
		/ 4	remander in Chapter	000, r.i.			
	0/1//	Ph					
	Registe	red Agent's Signature	(DEOLUBED)				
	· · · · · · · · · · · · · · · · · · ·	Agont a pignatun	(KEQUIKED)				
		400 Nmm		Ţ			
		(CONTINUED)		AL AL			
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The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager MGR Richard A. Miller 2323 S. Florida Avenue Lakeland, Florida 33803 MGR C. Austen Roberts P. O. Box 238 Lake Butler, Florida 32054 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (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.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any, REQUIRED SIGNATURE:// Signature of a member or an authorized representative of a member. 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. Richard A. Miller 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)

ARTICLE IV-