

£

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000298596 3)))



H240002985953ABCC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Fax Number : (850)617-6381 From: Account Name : MORRIS A. LECOMPTE, P.A. Account Number : 072100000461 Phone : (727)896-1000 Fax Number : (727)896-1009 Fax Number : (727)896-1009 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please Email Address: MLecompte MALPA. Netro		Division of Co		
Account Name : MORRIS A. LECOMPTE, P.A. Account Number : 072100000461 Phone : (727)896-1000 Fax Number : (727)896-1009		Fax Number	: (850)617-6381	
Account Number : 072100000461 Phone : (727)896-1000 Fax Number : (727)896-1009 *Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**	From:			
Phone : (727)896-1000 Fax Number : (727)896-1009		Account Name	: MORRIS A. LECOMPTE, P.A.	
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.		Account Number	: 072100000461	
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.		Phone	: (727)896-1000	ST 29
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.		Fax Number	: (727)896-1009	74 A
annual report mailings.Enter only one email address please.** 🔔				E A A
annual report mailings.Enter only one email address please.** 🔔			• · · · · · · · · · · · · · · ·	
Email Address: MLecompte @ MALPA. netto				
Email Address: / ILCCONDICCS/INET/INDIC			ecomote @ MAIPA o	
	Ema	il Address: / \}		

FLORIDA LIMITED LIABILITY CO.

Metroplex Title, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00



6

•

H24000298596 3

ARTICLES OF ORGANIZATION OF METROPLEX TITLE, LLC

The undersigned, acting as the organizer of a limited liability company to be formed under the Florida Revised Limited Liability Company Act, as amended (the "Act"), hereby forms a Florida limited liability company (this "Company") pursuant to the Act and hereby sets forth the following Articles of Organization (these "Articles"):

ARTICLE I

Name

The name of this Company shall be Metroplex Title, LLC

ARTICLE II

Place of Business

The street address of the principal office of this Company shall be 8622 N. Himes Ave., Tampa, FL 33614 and the mailing address of the principal office of this Company shall be 8622 N. Himes Ave., Tampa, FL 33614 or such other place or places as may be designated by the manager(s) from time to time.

ARTICLE III

Registered Agent and Office

The initial registered agent for this Company shall be Morris A. LeCompte, and the address of the registered agent for service of process shall be 5245 Central Avenue, St. Petersburg, FL 33710.

	ARTICLE IV Management of Busin	<u>ess</u>		1024 SEP - 3	
The Company shall be a manager manager is as follows:	-managed company.	The name and	address of i	ö	initial'
(1)	Sean Stephens 8622 N. Himes Ave. Tampa, FL 33614			- S	

H24000298596 3

The undersigned has executed these Articles of Organization this 3rd day of September, 2024.

Morris A. LeCompte Authorized Representative

<u>CERTIFICATE OF DESIGNATION</u> <u>AND</u> <u>ACCEPTANCE BY REGISTERED AGENT</u>

The undersigned, having been named Registered Agent and designated to accept service of process for Metroplex Title, LLC, at 5245 Central Avenue, St. Petersburg, FL 33710, hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete performance of the duties hereunder.

Dated: September 3, 2024

MORRIS A. LeCOMPTE

ALLAHASSEE, F 1024 SEP - 3 PM 10: Γ TC. C ഗ