M05000004375

(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: 844 FOR C

Office Use Only



600058138566

08/04/05--01036-001 **125.00

· ALTONOM

05 NID -1: 101 2: 25

TRANSMITTAL LETTER

	ration Section on of Corporat	ions		. :		
SUBJECT:	First SRI Title &	Escrow, LLC				
		(Name of Lin	nited Liability	Company)		
Florida," Certi	ificate of Exist		submitted to re		rization to Transact Business ve referenced foreign limited	
Please return a	all corresponde	ence concerning this i	matter to the f	ollowing:		
		Gary F. Weltmann				
		(Na	ame of Person)		
<u>Fi</u>	rst Title & Escro					
		(F)	irm/Company))		
30) West Gude Dr	ive, Fourth Floor	·			
			(Address)			
	Rockville.	Maryland 20850				
	***************************************		tate and Zip C	Code)		
For further int	formation conc	erning this matter, pl	_			
Gary F	. Weltmann		at (_ ³⁰¹) 315.819	0	
-	(Nam	e of Person)	(Area C	ode & Daytin	ne Telephone Number)	
STREET ADDRESS:		S:		AILING ADD		
_	ration Section			Registration Section		
Division of Corporations			Division of Corporations			
409 E. Gaines Street			P.O. Box 6327 Tallahassee, Florida 32314			
Tallah	assee, Florida	32399	Tal	lahassee, Flor	1da 32314	
Enclosed is a	check for the f	ollowing amount:				
Z \$125	5.00 Filing Fee	□ \$130.00 Filing Fee & Certificate of		Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified	Сору

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608,503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	First SRI Title & Escrow, LLC							
	(Name of Foreign Limited Liability Company)							
2,	Maryland (Jurisdiction under the law of which foreign limited liability company is organized) 3. 20-3000554 (FEI number, if applicable)	-						
4.	June 24, 2005 (Date of Organization) 5 3000 (Duration: Year limited liability company will cease to exist or "perpetual")	-						
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)	- .						
7.	30 West Gude Drive, Suite 450, Rockville, Maryland 20850							
	St.	-						
	(Street Address of Principal Office)							
8.	If limited liability company is a manager-managed company, check here							
9.	The name and usual business addresses of the managing members or managers are as follows:							
	First Title & Escrow, Inc., (Stephen Papermaster, President of Managing member) 30 West Gude Drive, 😥	_						
	Fourth Floor, Rockville, Maryland 20850	-						
	The Market was a second of the	-						
the). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rec e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a instation of the certificate under oath of the translator must be submitted.)	cords i						
1 1	Nature of business or purposes to be conducted or promoted in Florida:							
	To conduct all facets of business related to the insurance, real estate and finance fields.							
		\wedge						

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Gary FGary Weltmann, VP, Managing Member, First Title & Escrow, Inc.

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:					
Fir	st SRI Title & Escrow, LLC					
2.	The name and the Florida street address of the registered agent and office are:					
	C T Corporation System					
	(Name)					
	1200 South Pine Island Road					
	Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	Plantation FL 33324					
	City/State/Zip					
lia ag re	wing been named as registered agent and to accept service of process for the above stated limited bility company at the place designated in this certificate, I hereby accept the appointment as registered ent and agree to act in this capacity. I further agree to comply with the provisions of all statutes lating to the proper and complete performance of my duties, and I am familiar with and accept the ligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. Stacy M. Rosenthal Vice President and Assistant Secretary (Signature)					

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT FIRST SRI TITLE & ESCROW, L.L.C. IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JULY 29, 2005.

Paul B. Anderson Charter Division

