

UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
JACKSONVILLE DIVISION

In re:

Chapter 11 Case

TAYLOR, BEAN & WHITAKER  
MORTGAGE CORP.,  
REO SPECIALISTS, LLC, and  
HOME AMERICA MORTGAGE, INC.,

Case No. 3:09-bk-07047-JAF  
Case No. 3:09-bk-10022-JAF  
Case No. 3:09-bk-10023-JAF

Debtors

Jointly Administered Under  
Case No. 3:09-bk-07047-JAF

\_\_\_\_\_  
In re:

TAYLOR, BEAN & WHITAKER  
MORTGAGE CORP.,

Case No. 3:09-bk-07047-JAF

\_\_\_\_\_  
Applicable Debtor.

**REQUEST FOR JUDICIAL NOTICE IN SUPPORT OF PLAN TRUSTEE'S  
OBJECTION TO CLAIM FILED BY JOHN AND TERRI BIRD**

Neil F. Luria, as Plan Trustee ("Plan Trustee") for the Taylor, Bean & Whitaker Plan Trust<sup>1</sup> (the "Plan Trust"), by and through undersigned counsel and pursuant to Rule 201 ("Judicial Notice of Adjudicative Facts") of the Federal Rules of Evidence, hereby requests that the Court take judicial notice of the Florida Division of Corporations "Sunbiz.org" corporate records for Citrus Land Title, LLC, attached hereto as composite **Exhibit "A,"** in support of the Plan Trustee's Objection [D.E. 5900] to Claim No. 1523 filed by John A. and Terri L. Bird on the basis that Claim No. 1523. The Plan Trustee states in support thereof:

<sup>1</sup> As of the effective date of the *Third Amended and Restated Joint Plan of Liquidation of the Debtors and the Official Committee of Unsecured Creditors* [D.E. 3240] (the "Plan"), August 10, 2011, the Debtors and the Official Committee of Unsecured Creditors have been replaced, in most part and according to the terms of the Plan, by the Taylor, Bean & Whitaker Plan Trust (the "Plan Trust").

1. On July 21, 2011, the Plan Trustee filed the Objection to Claim No. 1523 on the basis that Claim No. 1523 is owed by Citrus Land Title, LLC ("Citrus"), a company owned by Lee B. Farkas and totally unaffiliated with the Debtor, Taylor, Bean & Whitaker Mortgage Corp.

2. On September 18, 2012, the Birds filed a Response [D.E. 6156] in opposition to the Plan Trustee's Objection. The Objection and the Response are currently set for a final evidentiary hearing on June 6, 2013.

3. Rule 201(a) of the Federal Rules of Evidence, which are applicable to this proceeding, provides that "[t]he court may judicially notice a fact that is not subject to reasonable dispute because it (1) is generally known within the trial court's territorial jurisdiction; or (2) can be accurately and readily determined from sources whose accuracy cannot reasonably be questioned." Both subsection of Rule 201(a) are met in this instance. Furthermore, *Florida Accountants Ass'n v. Dandelake*, 98 So. 2d 323, 327 (Fla. 1957) provides that "[t]his court takes judicial notice of the public records of this state . . . ."

4. Citrus, as a Florida Limited Liability Corporation, is registered<sup>2</sup> with the Florida Department of State, Division of Corporations (the "Division"). That Division maintains a website ("Sunbiz.org") containing corporate records for entities, like Citrus, that are registered in the state of Florida.

5. By filing this Request, the Plan Trustee requests that the Court take judicial notice of (a) the "Detail by Entity Name" for Citrus, maintained on Sunbiz.org, (b) all annual reports filed by Citrus, and (c) the formation documents for Citrus maintained on Sunbiz.org by the Division, which are all included within composite Exhibit A to this Request.

**I HEREBY CERTIFY** that I am admitted to the Bar of the United States District Court for the Middle District of Florida and I am in compliance with the additional qualifications to practice in this court set forth in Local Rule 2090-1(a).

Dated: June 3, 2013

Respectfully submitted,

BERGER SINGERMANN LLP  
*Counsel to Neil F. Luria, Plan Trustee for the  
Taylor, Bean & Whitaker Plan Trust*  
1450 Brickell Avenue  
Suite 1900  
Miami, FL 33131  
Telephone: (305) 755-9500  
Facsimile: (305) 714-4340

By: /s/ James D. Gassenheimer  
James D. Gassenheimer  
Florida Bar No. 959987  
[jgassenheimer@bergersingerman.com](mailto:jgassenheimer@bergersingerman.com)  
Alisa Paige Mason  
Florida Bar No. 084461  
[pmason@bergersingerman.com](mailto:pmason@bergersingerman.com)

**CERTIFICATE OF SERVICE**

**I HEREBY CERTIFY** that a true and correct copy of the foregoing was served electronically through the Court's CM/ECF system and via U.S. mail, postage pre-paid, upon Karen O. Gaffney, Esq., Karen O. Gaffney, P.A., 205 West Dampier Street, Inverness, FL 34450 this 3<sup>rd</sup> day of June, 2013.

By: /s/ Alisa Paige Mason  
Alisa Paige Mason

## **EXHIBIT A**

# FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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## Detail by Entity Name

### Florida Limited Liability Company

CITRUS LAND TITLE, LLC

### Filing Information

Document Number	L00000015915
FEI/EIN Number	593693296
Date Filed	12/19/2000
State or Country	FL
Status	INACTIVE
Effective Date	01/01/2001
Last Event	ADMIN DISSOLUTION FOR ANNUAL REPORT
Event Date Filed	09/24/2010
Event Effective Date	NONE

### Principal Address

315 NE 14TH ST.  
OCALA, FL 34470

Changed: 01/06/2009

### Mailing Address

315 NE 14TH ST.  
OCALA, FL 34470

Changed: 01/06/2009

### Registered Agent Name & Address

FARKAS, LEE B  
315 NE 14TH ST.  
OCALA, FL 34470

Name Changed: 07/18/2006

Address Changed: 01/06/2009

### Manager/Member Detail

#### **Name & Address**

Title MGR

FARKAS, LEE B  
315 NE 14TH ST.  
OCALA, FL 34470

Title MGR

PORTER, KIMBERLY A  
315 NE 14TH ST.  
OCALA, FL 34470

### Annual Reports

Report Year	Filed Date
2007	03/30/2007
2008	01/08/2008
2009	01/06/2009

### Document Images

<a href="#">01/06/2009 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">01/08/2008 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/30/2007 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">07/18/2006 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">01/31/2005 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">02/24/2004 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">02/19/2003 -- LIMITED LIABILITY CORPORATION</a>	<a href="#">View image in PDF format</a>
<a href="#">05/13/2002 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/13/2001 -- Merger</a>	<a href="#">View image in PDF format</a>
<a href="#">12/19/2000 -- Florida Limited Liabilites</a>	<a href="#">View image in PDF format</a>

Events   **No Name History**

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State of Florida, Department of State

**Current Principal Place of Business:**

640 NE 5TH ST., STE B  
CRYSTAL RIVER, FL 34429

**New Principal Place of Business:**

315 NE 14TH ST.  
OCALA, FL 34470

**Current Mailing Address:**

315 NE 14TH ST.  
OCALA, FL 34470

**New Mailing Address:**

FEI Number: 59-3693296      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FARKAS, LEE B  
101 NE 2ND STREET  
OCALA, FL 34470 US

**Name and Address of New Registered Agent:**

FARKAS, LEE B  
315 NE 14TH ST.  
OCALA, FL 34470 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_ 01/06/2009  
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: FARKAS, LEE B  
Address: 101 NE 2ND STREET  
City-St-Zip: Ocala, FL 34470  
  
Title: MGR ( ) Delete  
Name: PORTER, KIMBERLY A  
Address: 1904 W. MAIN STREET  
City-St-Zip: INVERNESS, FL 34452 44


**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: FARKAS, LEE B  
Address: 315 NE 14TH ST.  
City-St-Zip: Ocala, FL 34470  
  
Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LEE FARKAS MGR 01/06/2009  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT****FILED**  
**Jan 08, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L00000015915</b>		
1. Entity Name CITRUS LAND TITLE, LLC		
Principal Place of Business 1904 W MAIN ST INVERNESS, FL 34452		Mailing Address 101 NE 2ND STREET OCALA, FL 34470
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  FARKAS, LEE B 101 NE 2ND STREET OCALA, FL 34470		<b>DO NOT WRITE IN THIS SPACE</b>
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>		DATE _____ <small>(NOTE: Registered Agent's signature required when reinstating)</small>
<b>FILE NOW!!! FEE IS \$138.75</b> <b>After May 1, 2008 Fee will be \$538.75</b>		
9. MANAGING MEMBERS/MANAGERS		
TITLE	MGR	
NAME	FARKAS, LEE B	
STREET ADDRESS	101 NE 2ND STREET	
CITY- ST- ZIP	OCALA, FL 34470	
TITLE	MGR	
NAME	PORTER, KIMBERLY A	
STREET ADDRESS	1904 W. MAIN STREET	
CITY- ST- ZIP	INVERNESS, FL 34452	
TITLE		
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.		
SIGNATURE: <u>Lee FARKAS</u>		Date: <u>1-7-08</u> 352 690 9417
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		



01032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number  
59-3693296Applied For  
Not Applicable

5. Certificate of Status Desired

☒ \$5.00 Additional  
Fee Required



**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT****FILED**  
**Mar 30, 2007 8:00 am**  
**Secretary of State**

03-30-2007 90036 001 \*\*\*\*55.00

60030650



01162007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
59-3693296Applied For  
Not Applicable

5. Certificate of Status Desired

☒ \$5.00 Additional  
Fee Required**DO NOT WRITE IN THIS SPACE**

## 6. Name and Address of Current Registered Agent

FARKAS, LEE B  
101 NE 2ND STREET  
OCALA, FL 34470**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00.  
Due by May 1, 2007**

## 9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	FARKAS, LEE B
STREET ADDRESS	101 NE 2ND STREET
CITY-ST-ZIP	OCALA, FL 34470
TITLE	MGR
NAME	PORTER, KIMBERLY A
STREET ADDRESS	1904 W. MAIN STREET
CITY-ST-ZIP	INVERNESS, FL 34452
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE


3/27/07

Date

Daytime Phone # \_\_\_\_\_

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT****FILED**  
**Jan 31, 2005 8:00 am**  
**Secretary of State**

01-31-2005 90197 019 \*\*\*\*50.00

<b>DOCUMENT # L00000015915</b> 1. Entity Name <b>CITRUS LAND TITLE, LLC</b>					
Principal Place of Business <b>1904 W MAIN ST INVERNESS, FL 34452</b>			Mailing Address <b>1904 W MAIN ST INVERNESS, FL 34452</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		01062005 Chg-LLC CR2E083 (10/03)	
4. FEI Number <b>59-3693296</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$5.00 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>DAVIS, ERVIN E 1904 W MAIN ST INVERNESS, FL 34452</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>3500 E. OAK TRACE PATH</b> City <b>FL</b> Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Ervin E Davis</i></u> DATE <u>1/05/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2005</b>			<b>Make check payable to Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM DAVIS, ERVIN E 1904 W MAIN ST INVERNESS, FL 34452</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>3500 E. OAK TRACE PATH INVERNESS FL 34452</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u><i>Ervin E Davis</i></u> <b>ERVIN E. DAVIS</b> <u>1/5/05</u> <b>352 634 4625</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 19, 2003 8:00 am**  
**Secretary of State**

02-19-2003 90001 021 \*\*\*\*50.00

DOCUMENT # L00000015915



1. Entity Name  
**CITRUS LAND TITLE, LLC**

Principal Place of Business

**1904 W MAIN ST  
INVERNESS FL 34452**

Mailing Address

**1904 W MAIN ST  
INVERNESS FL 34452**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES4. FEI Number **59-3693296**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DAVIS, ERVIN E  
1904 W MAIN ST  
INVERNESS FL 34452**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM DAVIS, ERVIN E 1801 S RIDGEWOOD PR INVERNESS FL 34452</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *ERVIN E DAVIS* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

2/17/03

Date

352 724 9899

Daytime Phone #

CFR2E083 (10/02)

**2002 UNIFORM BUSINESS REPORT (UBR)****FILED****May 13, 2002 8:00 am**  
**Secretary of State**

05-13-2002 90202 010 \*\*\*\*50.00

**DOCUMENT # L00000015915**

1. Entity Name

**CITRUS LAND TITLE, LLC**

Principal Place of Business

**1904 W MAIN ST  
INVERNESS FL 34452**

Mailing Address

**1904 W MAIN ST  
INVERNESS FL 34452****900042**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**59-3693296**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$5.00 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DAVIS, ERVIN E  
1904 W MAIN ST  
INVERNESS FL 34452**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State  
Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	<b>MGRM</b>			
	<b>ERVIN E. DAVIS</b>			
	<b>1601 S. RIDGEWOOD PT.</b>			
	<b>INVERNESS, FL. 34452</b>			

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:****SIGNATURE REQUIRED****ERVIN E. DAVIS 4/22/02 352 726 9899**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)

L000000015915

**WILSON & WILLIAMS, P.A.**

Attorneys at Law  
954 East Silver Springs Boulevard  
Ocala, Florida 34470

Robert D. Wilson  
Reuben S. Williams, IV

Telephone: (352) 629-9747  
Facsimile: (352) 629-5616  
E-Mail: benpa@atlantic.net

**MJH**

March 8, 2001

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

600003850316--9  
-03/13/01--01051--005  
\*\*\*\*\*70.00 \*\*\*\*\*70.00  
60.00

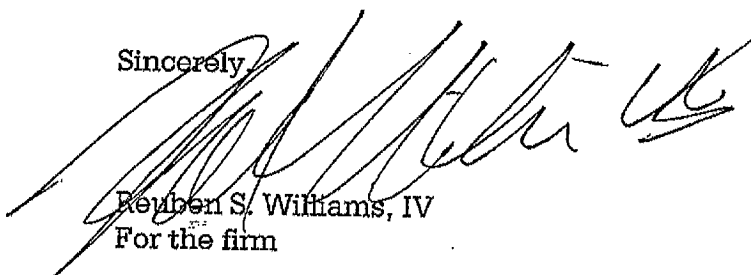
13th  
Re: Merger of Citrus Land Title, Inc. into Citrus Land Title, LLC

Dear Sir / Madame:

Enclosed please find the original and one copy of the Articles of Merger together with the Plan of Merger for the above-referenced matter. I am also enclosing this firm's check in the amount of \$70.00 for the filing fee. Please file accordingly and return the copy of the Articles of Merger to me.

Thank you for your attention to this matter.

Sincerely,

  
Reuben S. Williams, IV  
For the firm

RSW/bb  
Encl: Articles of Merger  
Plan of Merger

FILED  
01 MAR 13 PM 5:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF MERGER  
Merger Sheet

-----  
MERGING:

CITRUS LAND TITLE, INC., a Florida Corporation, P99000009144

into

CITRUS LAND TITLE, LLC, a Florida entity L00000015915

File date: March 13, 2001

Corporate Specialist: Michelle Hodges

FILED  
01 MAR 13 PM 5:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
01 MAR 13 PM 5:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF MERGER OF  
CITRUS LAND TITLE, INC. INTO  
CITRUS LAND TITLE, L.L.C.**

The following Articles of Merger are being submitted in accordance with sections 607.1109 and 608.4382, Florida Statutes.

**FIRST:** The exact name, street address of its principal office, jurisdiction, and entity type for each merging party are as follows:

<u>Name and Street Address</u>	<u>Jurisdiction</u>	<u>Entity Type</u>
Citrus Land Title, Inc. 1904 W. Main Street Inverness, Florida 34452	Florida	Florida Profit Corporation

Florida Document Registration Number: P99000009144      FEI Number: 59-3554671

Citrus Land Title, L.L.C. 1904 W. Main Street Inverness, Florida 34452	Florida	Florida Limited Liability Corporation
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Florida Document Registration Number: L000000015915      FEI Number: 59-3693296

**SECOND:** The exact name, street address of its principal office, jurisdiction, and entity type for the surviving party is as follows:

Citrus Land Title, L.L.C. 1904 W. Main Street Inverness, Florida 34452	Florida	Florida Limited Liability Corporation
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Florida Document Registration Number: L000000015915      FEI Number: 59-3693296


**THIRD:** The attached Plan of Merger meets the requirements of sections 607.1108 and 608.438, Florida Statutes and was approved by each domestic corporation and limited liability company that is a party to the merger in accordance with Chapters 607 and 608, Florida Statutes.


**FOURTH:** This merger is permitted under the respective laws of all applicable jurisdictions and is not prohibited by the regulations or articles of organization of any limited liability company that is a party to the merger.

**FIFTH:** The merger shall become effective as of the date the Articles of Merger are filed with the Florida Department of State.

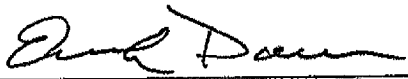
**SIXTH:** The Articles of Merger comply and were executed in accordance with the laws of each parties applicable jurisdiction.

CITRUS LAND TITLE, INC.

By  Dated March 1, 2001  
Ervin E. Davis  
President, Director, Secretary  
And Treasurer

By  Dated March 1, 2001  
Terry L. Davis  
Director

CITRUS LAND TITLE, L.L.C.

By  Dated March 1, 2001  
Ervin E. Davis  
Manger and Sole Member



**PLAN OF MERGER**  
**OF CITRUS LAND TITLE, INC INTO**  
**CITRUS LAND TITLE, L.L.C.**

The following Plan of Merger, which was adopted and approved unanimously by each party to the merger in accordance with sections 607.1107 and 608.4381, Florida Statutes, is being submitted in accordance with sections 607.1108 and 608.438, Florida Statutes.

**FIRST:** The exact name and jurisdiction of each merging party are as follows:

<u>Name</u>	<u>Jurisdiction</u>
Citrus Land Title, Inc.	Florida
Citrus Land Title, L.L.C.	Florida

**SECOND:** The exact name and jurisdiction of the surviving party are as follows:

<u>Name</u>	<u>Jurisdiction</u>
Citrus Land Title, L.L.C.	Florida

**THIRD:** The terms and conditions of the merger are that Citrus Land Title, Inc. shall merge into Citrus Land Title, L.L.C. in exchange for the payment in cash and other consideration to the sole shareholders of Citrus Land Title, Inc., Ervin E. Davis and Terry L. Davis.

**FOURTH:** The manner and basis of converting the shares of the merged party, Citrus Land Title, Inc. into Citrus Land Title, L.L.C. is the payment in cash and other consideration.


**FIFTH:** Citrus Land Title, L.L.C. is the surviving entity and it is to be managed by one manager whose name and address is:

Ervin E. Davis  
1904 W. Main Street  
Inverness, Florida 34452

**SIXTH:** The effective date of the merger shall be the date the Articles of Merger are filed with the Florida Department of State.

Approved and adopted by the unanimous consent of the officers, director and shareholder of Citrus Land Title, Inc. on March 1, 2001.

CITRUS LAND TITLE, INC.



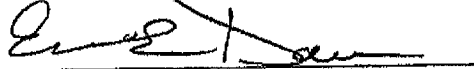
Ervin E. Davis  
President, Director, Secretary  
And Treasurer



Terry L. Davis  
Director

Approved and adopted by the unanimous consent of the manager and member of Citrus Land Title, L.L.C. on March 1, 2001.

CITRUS LAND TITLE, L.L.C.



Ervin E. Davis  
Sole Manager and Sole Member

L0000000015915  
CITRUS LAND TITLE  
~ inc ~

December 12, 2000

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

EFFECTIVE DATE

1-1-01

300003504673--6  
-12/19/00-01009-009  
\*\*\*\$125.00 \*\*\*\$125.00

Dear Sir/Madam:

Enclosed herewith are the ARTICLES OF ORGANIZATION FOR CITRUS LAND TITLE, LLC. Also enclosed is a check for \$125 for the filing fee (\$100) and the registered agent designation fee (\$25).

Please note the effective date of January 01, 2000. Thank you.

Sincerely,



Ervin E. Davis

FILED  
00 DEC 19 PM 2:12  
TALLAHASSEE, FLORIDA

56

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

CITRUS LAND TITLE, LLC

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

1904 W. MAIN ST., INVERNESS, FL 34452

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

ERVIN E. DAVIS

Name

1904 W. MAIN ST.

Florida street address (P.O. Box NOT acceptable)

INVERNESS, FL 34452

City, State, and Zip

*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 608, F.S.*



Registered Agent's Signature

### Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

### Article V - Effective Date

The Limited Liability Company shall be effective JANUARY 01, 2001.



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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ERVIN E. DAVIS

Typed or printed name of signee

### Filing Fees:

\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)

FILED  
00 DEC 19 PM 2:12  
TALLAHASSEE, FLORIDA