

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M22000018897

Entity Name: CONVERGE MORTGAGE, LLC**Current Principal Place of Business:**575 LYNNHAVEN PKWY
SUITE 100
VIRGINIA BEACH, VA 23452**Current Mailing Address:**575 LYNNHAVEN PKWY
SUITE 100
VIRGINIA BEACH, VA 23452 US**FEI Number:** 85-4322329**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MANAGER
Name	WEAVER, SUZANNE
Address	575 LYNNHAVEN PKWY SUITE 100
City-State-Zip:	VIRGINIA BEACH VA 23452

Title	MANAGER
Name	HARRIS, WILLIAM
Address	575 LYNNHAVEN PKWY SUITE 100
City-State-Zip:	VIRGINIA BEACH VA 23452

Title	MEMBER
Name	MOVEMENT JOINT VENTURES, LLC
Address	575 LYNNHAVEN PKWY SUITE 100
City-State-Zip:	VIRGINIA BEACH VA 23452

Title	MANAGER
Name	JONES, DAN
Address	575 LYNNHAVEN PKWY SUITE 100
City-State-Zip:	VIRGINIA BEACH VA 23452

Title	MEMBER
Name	INTERCEPT PROPERTIES, LLC
Address	575 LYNNHAVEN PKWY SUITE 100
City-State-Zip:	VIRGINIA BEACH VA 23452

Title	MEMBER
Name	CAMX2, LLC
Address	575 LYNNHAVEN PKWY SUITE 100
City-State-Zip:	VIRGINIA BEACH VA 23452

Title	MEMBER
Name	CREE MORTGAGE HOLDINGS, LLC
Address	575 LYNNHAVEN PKWY SUITE 100
City-State-Zip:	VIRGINIA BEACH VA 23452

Title	MEMBER
Name	C. SHELTON VENTURES, LLC
Address	575 LYNNHAVEN PKWY SUITE 100
City-State-Zip:	VIRGINIA BEACH VA 23452

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I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUZANNE WEAVER

MANAGER

02/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title	MEMBER
Name	FAM FIVE I, LLC
Address	575 LYNNHAVEN PKWY SUITE 100
City-State-Zip:	VIRGINIA BEACH VA 23452