

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

Continues on page 2

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