| Supar<br>Rayling<br>900 6<br>Maple<br>Chry/State/ | Address Zip Phone # | 660<br>Ste. 104<br>1102     | 0084                    | 43                          |
|---|---------------------|-----------------------------|-------------------------|-----------------------------|
|   |                     |                             | Office Use Only         | ,                           |
| CORPORATION                                       | I NAME(S) & DOCUI   | MENT NUMBER(S), (if         | known):                 |                             |
| 1   |                     |                             |                         |                             |
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| walk in   | Pick up time        | ·<br>                       | Certified Copy          | TAN T                       |
| ☐ Mail out  | ☐ Will wait         | Photocopy                   | Certificate of St       | atus m                      |
| NEW PYCA  |                     |                             | 二<br>二<br>二             |                             |
| NEW FILINGS                                       |                     | AMENDMENTS                  | ORID<br>ORID            | M 12: 39                    |
| Profit Not for Profi                              | ir .                | Amendment  Resignation of P | A., Officer/Director    | - <del></del>               |
| Limited Liab                                      | oility              | Change of Regist            | ered Agent              | - <b>/</b>                  |
| Domestication Other                               | on                  | Dissolution/With            | drawal                  | $au^{\prime}$               |
|   | ~~                  | _                           |                         | ~/0                         |
| OTHER FILINGS                                     |                     | REGISTRATION/Q              | <u>UALIFICATION</u>     | 17                          |
| Annual Report Fictitious Na                       |                     | Foreign Limited Partnersh   | $\cup$                  | $\sim$ 1                    |
| 110000000110                                      |                     | Reinstatement               |                         |                             |
|   |                     | ☐ Trademark☐ Other          |                         | V                           |
|   |                     |                             |                         |                             |
|   |                     |                             | Examiner's Initia       | ls                          |

CR2E031(7/97)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Guaranteed Direct Wholesale Mortgages, LC

## ARTICLE II - Address:

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

900 Sixth Ave. South, #103 Naples, FL 34102

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

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

| Raymond J. Bowie                                 |  |  |  |  |
|--|--|--|--|--|
| Name   |  |  |  |  |
| 900 Sixth Ave. South, #104                       |  |  |  |  |
| Florida street address (P.O. Box NOT acceptable) |  |  |  |  |
| Naples FL 34102                                  |  |  |  |  |
| 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.

(An additional article must be added if an effective date is requested)

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.)

Raymond J. Bowie

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)

02 JAN -8 PH 12: 39
SECRETARY OF STATE