Mortgage Stoup, IC 95 Charles St. Address Frostproof FL 33843 Phone # City/State/Zip Phone # Corporation Name(s) & Document Number(s), (if known):	·9)0
1. 00789-00123-00167 W02-14000 (Document #)	13 CS
2. (Corporation Name) (Document #)	5U
3(Corporation Name) (Document #)	
4	
(Corporation Name) (Document #)	
Walk in ☐ Pick up time ☐ Certified Copy Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Staffs	
Mail out Will wait Photocopy Certificate of Staffs AMENDMENTS AMENDMENTS AMENDMENTS AMENDMENTS Amendment Resignation of R.A., Officer/Director Limited Liability Domestication Other Certificate of Staffs AMENDMENTS AMENDMENTS Change of Registered Agent Dissolution/Withdrawal Merger	
OTHER FILINGS REGISTRATION/QUALIFICATION	-
Annual Report Fictitious Name Limited Partnership Reinstatement Trademark Other	
CR2E031(7/97) Examiner's Initials	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 16, 2002

MORTGAGE GROUP, LLC 95 CHARLES ST. FROSTPROOF, FL 33843

SUBJECT: MORTGAGE GROUP, LLC Ref. Number: W02000014226

We have received your document for MORTGAGE GROUP, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 702A00031321

ARTICLE I - Name: The name of the Limite	d Liability Company is: Mortgage Group, LLC
_	s: i street address of the principal office of the Limited Liability Company is: ., Frostproof, Fl 33843
ARTICLE III - Regist	ered Agent, Registered Office, & Registered Agent's Signature:
The name and the Flori	da street address of the registered agent are:
	Shigeru Inagawa
	Name
	95 Charles St.
	Florida street address (P.O. Box NOT acceptable)
	Frostproof, FL 33843
	City, State, and Zip
registered agent and a statutes relating to the	e place designated in this certificate, I hereby accept the appointment as gree to act in this capacity. I further agree to comply with the provisions of all proper and complete performance of my duties, and I am familiar with and of my position as registered agent as provided for in Chapter 608, F.S.
•	Registered Agent's Signature
☐ The Limited Liab	ment (Check box if applicable.) ility Company is to be managed by one manager or more managers and is, ger - managed company.
(An a	Iditional article must be added if an effective date is requested)
	Sinagara AG &
Si	nature of a member or an authorized representative of a member.
10	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.)
	Shigeru Inagawa
_	Typed or printed name of signee

<u>Filing Fees:</u> \$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)