

L04000046680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

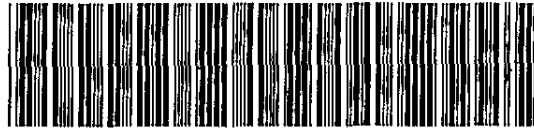
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Entity	
Document	
Number	
Office Use Only	DCC
Number	
Number	
Number	
Number	
Acknowledgement	DCC
W. P. Verifier	DCC



600037367526

05/09/04--01036--002 **100.00

05/17/04--01018--013 **25.00

SECRETARY OF
TALAMON

2004 JUN 22 P 3:16

FILED

money

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The OmniOne Mortgage Group, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CAROL A. Buford
(Name of Person)

OmniOne
(Firm/Company)

160 International Parkway, Suite 140
(Address)

Heathrow, Florida 32746
(City/State and Zip Code)

SECRETARY OF
TALLAHASSEE, FL

JUN 22 P 3 16

FILED

For further information concerning this matter, please call:

CAROL A. Buford at (407) 333-9445
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



June 15, 2004

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

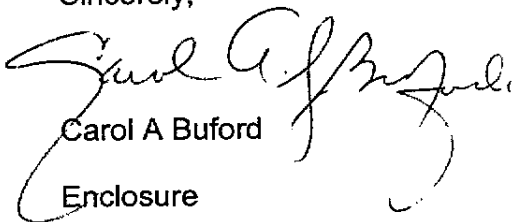
RE: The OmniOne Mortgage Group, LLC

To Whom It May Concern:

Enclosed please find a check in the amount of **\$25.00**. This represents the amount owed to complete the registration for the above named company.

Could you please correct the name to read **THE OMNIONE MORTGAGE GROUP, LLC**. You currently have Omni One as two words.

Sincerely,


Carol A Buford
Enclosure



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

June 11, 2004

CAROL A. BUFORD
OMNI ONE
160 INTERNATIONAL PARKWAY, STE 140
HEATHROW, FL 32746

SUBJECT: THE OMNI ONE MORTGAGE GROUP, LLC
Ref. Number: W04000022669

We have received your document for THE OMNI ONE MORTGAGE GROUP, LLC and check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$25.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

Please return 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) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 504A00039665

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

The Omnione Mortgage Group, LLC

ARTICLE II - Address:

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

Principal Office Address:

160 International Parkway
Suite 140
Heathrow, FL 32746

Mailing Address:

160 International Parkway
Suite 140
Heathrow, FL 32746

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

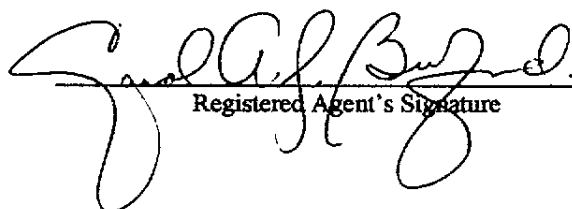
The name and the Florida street address of the registered agent are:

CAROL A. Buford
Name

160 International PKwy - Ste 150
Florida street address (P.O. Box **NOT** acceptable)

Heathrow, FL FLORIDA 32746
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, Florida Statutes..


Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Carol A. J. Buford
160 International Parkway #140
Heathrow, FL 32746

MGR

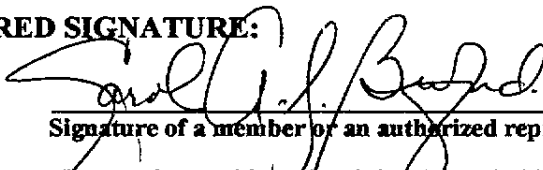
Carl Buford
160 International Parkway #140
Heathrow, FL 32746

(Use attachment if necessary)

2004 JUN 22 P 3:16
SECRETARY
FILED
HALL/RECEIVED

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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.)

CAROL A. J. Buford

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)