

Division of Corporations

L040000079429

Page 1 of 1

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : GERALD WEINBERG, P.C.
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Phone : (800)342-9856
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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

AMERICORP LENDING LLC

Certificate of Status	0
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AMERICORP LENDING LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1062 S. MILITARY TRAIL #208
DEERFIELD BEACH, FL 33442

1062 SOUTH MILITARY TRAIL #208
DEERFIELD BEACH, FL 33442

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

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

Robert R. Ovalap
Name

1062 SOUTH MILITARY TRAIL #208
Florida street address (P.O. Box ~~NOT~~ acceptable)

DEERFIELD BEACH FL 33442
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..

Robert R. Ovalap
Registered Agent's Signature

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Page 1 of 2

(H04000218842 3)

(H04000218842 3)

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TALLAHASSEE, FLORIDA

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

MGRM

Name and Address:

ROBERT DUNLAP
10925 DAVID TAYLOR DR STE 100
CHARLOTTE, NC 28262

(Use attachment if necessary)

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.)

ROBERT DUNLAP

Typed or printed name of signee

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