## Electronic Filing Cover Sheet

Public Access System

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000238792 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

: NASON, YEAGER, GERSON, WHITE & LICCE, P.A. Account Name

Account Number: 073222003555 : (561)686-3307 Phone : (\$61)686-5442 Fax Number

ILYIS!ON OF CORPORATION

# LIMITED LIABILITY COMPANY

Liberty Mortgage XVI, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

## ARTICLES OF ORGANIZATION

### OF

# LIBERTY MORTGAGE XVI. LLC

I, the undersigned authorized representative of the Members, hereby makes, acknowledges and files these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

The name of this Limited Liability Company is:

Liberty Mortgage XVI, LLC

The street address and mailing address of the principal office is:

One South Ocean Blvd. Suite 4 Boca Raton, Florida 33432

The period of duration for the Limited Liability Company shall be perpetual.

The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of its Members and is, therefore, a member-managed company.

# ARTICLE Y

## ADMISSION OF ADDITIONAL MEMBERS

The Members shall have the right to admit additional members.

IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 7th day of October, 2005.

Gary N. Gerson, Authorized Representative of the

Members

2005 OCT -7 AM 8: 41
SECRETARY OF STATE
TALL ANASSEF, FLORID

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

### Liberty Mortgage XVI, LLC

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

Gary N. Gerson 1645 Palm Beach Lakes Blvd. Suite 1200 West Palm Beach, Florida 33401

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

Gary N. Gerson Registered Agent

SECRETARY OF STATE