# Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

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From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994

Fax Number : (305)444-4977

M. Markeynas

FLORIDA/FOREIGN LIMITED LIABILITY CO.

LOAN TECH PROCESSING, LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efileovr.exe

07/11/2006

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

### LOAN TECH PROCESSING, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

#### ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

126 SW 17TH RD	126 SW 17TH RD	
# 206	# 206	
MIAMI, FL 33129	MIAMI, FL 33129	
	nt, Registered Office, & Registered Agent e as its own Registered Agent. You must designate an indi- ration.)	
The name and the Florida street a	ddress of the registered agent are:	S
JORDAN CA	ISAÑAS	Ş. Ş.
	Name	
400 014 47	TI DO #000	

126 SW 17TH RD - # 208

Florida street address (P.O. Box NOT acceptable)

MIAMI

FL 33129

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..

egisterni Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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ECER

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	ger(s) or Managing Member(s): of each Manager or Managing Member is as follows:	
Title: "MGR" = Manager "MGRM" = Managing	Name and Address:	
MGRM	JORDAN CASAÑAS	
	126 SW 17TH RD - # 206	
	MIAMI, FL 33129	
MGRM	CYNTHIA FLORES	٠
	126 SW 17TH RD - # 208	
	MIAMI, FL 33129	
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	70	<u>ئے</u>
(Use attachment if nece	essary)	=
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<u>required</u> signa	TURE:	
لمليحر		
(In aco	ture of a member or an authorized representative of a member.  condance with section 608,408(3), Florida Statutes, the execution a document constitutes an affirmation under the penalties of perjury the facts stated herein are true.)	
JOH	RDAN CASAÑAS	
and the state of t	Typed or printed name of signee	
Filing Fees:	,	
\$125,00 Filing Fee for of Registered \$ 30,08 Certified Copy \$ 5,00 Certificate of \$	(Optional)	
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