(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
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DIVISION OF CORPORATION

## LAW OFFICES OF MICHAEL L. MOORE AND ASSOCIATES, P.A.

A Full Service Law Firm

2208 HILCREST ST. ORLANDO, FL 32803

· CORPORATE & BUSINESS

OFFICE: (407) 894-6447

FAX: (407) 894-0332

- ENTERTAINMENT
- CIVIL LITIGATION
- WILLS
- PERSONAL INJURY

- EMPLOYMENT •
- DISCRIMINATION .
- COMMERCIAL LITIGATION
  - PROBATE •
  - WRONGFUL DEATH .

January 25, 2007

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

#### TRANSMITTAL LETTER

**TO:** Registration Section

**Division of Corporations** 

SUBJECT: BrightView Mortgages, LLC \*\* Subject \*\* Subjec

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

Please return all correspondence concerning this matter to the following:

Michael L. Moore, Esquire 2208 Hillcrest Street Orlando, Florida 32803

For further information concerning this matter please call:

Michael L. Moore, Esquire at 407-894-6447

Sincerely,

Michael L. Moore

MLM:mkr

1,3

Enclosures: as stated

cc: Mr. Willie "Bill" Jefferson

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:		
The name of the Limited Liability Comp	pany is:	
BrightView Mortgages, LLC		
ARTICLE II – Address:	of the universal office of the Limited Lightlity Company	
is:	of the principal office of the Limited Liability Company	
15.		
Principal Office Address	Mailing Address	
6500 W. Colonial Drive	6500 W. Colonial Drive	
Orlando, Florida 32818	Orlando, Florida 32818	
<u>2</u>	nael L. Moore, Esquire 208 Hillcrest Street	
<del>-</del>	lando, Florida 32803	
<u>o.</u>	<u> </u>	
liability company at the place designate registered agent and agree to act in this of all statutes relating to the proper and with and accept the obligations of my p 608, Florida Statutes.	and to accept service of process for above stated limited and in this certificate, I hereby accept the appointment as a capacity. I further agree to comply with the provisions a complete performance of my duties, and I am familiar distinguished arent of provided for in Chapter of provided for in Chapter of Provided Agent's Signature	
ARTICLE IV – Manager(s) or Mana The name and address of each Manager	or Managing Member is as follows:	
<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	Willie "Bill" Jefferson 6975 Hyland Oaks Drive Orlando, Florida 32818	
•	Ollando, Florida 52010	

### **REQUIRED SIGNATURE:**

Signature of a member or an authorized representative of a member

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

W. G. "Bill" Jefferson

Typed or printed name of signee

Filing fees enclosed
\$100.00 Filing Fee for Articles of Organization
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy
\$ 5.00 Certificate of Status