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(Re	questor's Name)	<del></del>
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(Cit	y/State/Zip/Phone	<i>∓</i> #)
PICK-UP	☐ WAIT	MAIL
(Bu	sin <b>ess</b> Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## **COVER LETTER**

TO:

Registration Section

Division of Corporations	
SUBJECT: Fletcher Mortgage Company, 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:	
George William Blake Fletcher	
(Name of Person)	
Fletcher Mortgage Company, LLC	
(Firm/Company)	
106 SW 140th Terrace	
(Address)	
Newberry, FL 32669	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
George William Blake Fletcher at 352 331-3820	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00	
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street/Courier Address Registration Section Division of Corporations Division of Corporations Clifton Building Tallahassee, FL 32314  2661 Executive Center Circle Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the	e Limited Liability Con	npany is:		
	age Company, LLC			
(Must end with the v	words "Limited Liability Compa	any, "Limited Company" or their abbreviation	1 "LLC," or "L.C.,")	titi i i i i i i i i i i i i i i i i i
ARTICLE II - The mailing add		of the principal office of the Limi	ted Liability Comp	any is:
Principal Offic	ce Address:	Mailing Address:		<i>:</i>
106 SW 140th Ten	race	106 SW 140th Terrace		
Newberry, FL 326	69	Newberry, FL 32669		r same s Same same s
ine name and t	George E. Fletcher  1223 N.W. 114th D	Name	, 1	in the s
		street address (P.O. Box NOT acceptab	le)	
		- <del></del> -	<i>(c)</i>	
	GainesvilleCi	FL 32606 ty, State, and Zip		i li " well
liability con registered ager statutes relati	npany at the place desigr nt and agree to act in this ing to the proper and con	t and to accept service of process for nated in this certificate, I hereby acc s capacity. I further agree to compl nplete performance of my duties, ar n as registered agent as provided for	cept the appointmen ly with the provision nd I am familiar with	t as s of all h and
	Registered Ager	nt's Signature (REOÜIRED)	··· £m ∰	``!

(CONTINUED) Page 1 of 2

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Memb	ner
MGRM	George William Blake Fletcher
IVIGITIVI	106 SW 140th Terrace
	Newberry, FL 32669
<del> </del>	, <u> </u>
(Use attachment if necessary)	)
LEV: Effective date, if other	than the date of filing: (OPTIONAL)
Hective date is listed, the date days after the date of filing.)	e must be specific and cannot be more than five business days prior
o days after the date of ining.	1
REQUIRED SIGNATURE	•
	_
مده (مو	re William Blake Lletcher
	a member or an authorized representative of a member.
(In cassadana	ce with section 608.408(3), Florida Statutes, the execution
(in accordant	ce will section ovo. 400(3), Florida statues, the execution

George William Blake Fletcher

that the facts stated herein are true.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)