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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Mortgage Max Financial, 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:
Valerie Blair (Name of Person)
Mortgage Max Financial, UC
1173 Hideaway Drive Worth
Jacksonville, R 32259 (City/State and Zip Code)
For further information concerning this matter, please call:
Valerie Blair at (904) 237-6841 (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 & D\$155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



October 16, 2007

VALERIE BLAIR 1173 HIDEAWAY DRIVE NORTH JACKSONVILLE, FL 32259

SUBJECT: MORTGAGE MAX FINANCIAL LLC

Ref. Number: W07000051224

We have received your document for MORTGAGE MAX FINANCIAL LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Document Specialist

Division of Corporations - P.O. ROY 6397 - Tallahassaa, Florida 39314

Letter Number: 707A00060770

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
Mortacae Max *U.S.A				
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address: Mailing Address:				
1173 Hideanay Drive North 1173 Hideanay Drive North Jacksonville, Fr 32259 Tacksonville, Fr 32259				
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)				
The name and the Florida street address of the registered agent are: Valerie Blanc Name				
Florida street address (P.O. Box NOT acceptable)				
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				

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:		Name and Address:	
"MGR" = Manag "MGRM" = Man			
MGR	Valerie	Blair	
	1173 Hi	deamay Drive North	
	_ Jackson	WILL 35537	
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	Signature of a member or an authorized repre	Tentistive of a member 27 9 T	
	(In accordance with section 608.408(3), Florida :	Statutes, the execution r the penalties of perjury	
	of this document constitutes an affirmation under that the facts stated herein are true.)	Statutes, the execution r the penalties of perjury	
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•	Typed or printed name of sig	gnee Room	
Filing Fees:		E W	

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