

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : C. T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)222-1092  
Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

RECEIVED  
11 JUN 15 PM 4:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.  
SBAF Mortgage Fund I / Holding - City Center LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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11 JUN 15 AM 8:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

G. MCLEOD

JUN 16 2011

EXAMINER

**COVER LETTER**

TO: **Registration Section  
Division of Corporations**

SUBJECT: **SBAF Mortgage Fund I/Holding- City Center 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:

**Robert B. Smith**

Name of Person

**Sutherland Asbill & Brennan**

Firm/Company

**999 Peachtree Street, Suite 2300**

Address

**Atlanta, GA 30309**

City/State and Zip Code

**robert.smith@sutherland.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Robert B. Smith**

Name of Person

at **404** **853 8221**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, 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

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**SBAF Mortgage Fund I/Holding- City Center LLC**

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

**ARTICLE II - Address:**

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

**Principal Office Address:**

1801 Hermitage Blvd  
Suite 600  
Tallahassee, FL 32308

**Mailing Address:**

1801 Hermitage Blvd  
Suite 600  
Tallahassee, FL 32308

**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:

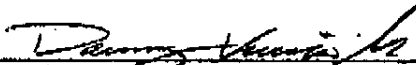
CT Corporation System  
Name

1200 South Pine Island Road

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

Plantation FL 33324  
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.*

  
Registered Agent's Signature (REQUIRED)

Danny Verdecchia, Jr. Asst. Secretary

(CONTINUED)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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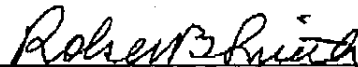
**ARTICLE IV- Manager(s) or Managing Member(s):**  
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
<u>MGMR</u>	<u>SBAF Mortgage Fund I/Holding, LLC</u>
	<u>1801 Hermitage Blvd, Suite 600</u>
	<u>Tallahassee, FL 32308</u>

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: June 15, 2011 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Robert B. Smith

Typed or printed name of signer

**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)