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FILING CANCELLED RETURNED CHECK

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SECRETARY OF STATES
ALL AHASSEF, FLORIDA

J. BRYAN

AUG 1 8 2011

EXAMINA

COVER LETTER

Registration Section

TO:

SUBJECT: Morto	age Lending New	vs, LLC
	Name of Limite	ed Liability Company
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.
Please return all corresp	condence concerning this matte	submitted for filing. er to the following: Name of Person LC Firm/Company
Javier Ze	elaya	
		Name of Person
Mortgage	E Lending News, L	LC Pag
		Firm/Company
11601 Bi	scayne Blvd, Suite	310B
1100 121	Joay, 10 Diva, Jako	Address
Miomi El i	22404	
Miami, FL		/State and Zip Code
info@mbne	•	
	E-mail address: (to be used fo	r future annual report notification)
For further information	concerning this matter, please	call:
Javier Zelaya		at (800) 821-6690
	of Person	Area Code & Daytime Telephone Number
Enclosed is a check for	or the following amount:	
	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, 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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	TI	C	LE	I	_	N	am	e:
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The name of the Limited Liability Company is:

Mortgage Lending News, 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: Mailing Address:

Javier Zelaya

11601 Biscayne Blvd, Suite 310B

Miami, FL 33181

11601 Biscayne Blvd, Suite 310B

Miami, FL 33181

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:

Javier Zelaya

Name

11601 Biscayne Blvd, Suite 310B

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

Miami

ET 33181

City, State, and Zip

FILED

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SECRETARY OF STATE SALLAHASSEE, FLORIDA

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)

(CONTINUED)

Page 1 of 2

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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:

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			OPTION cannot be more than five business d

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.)

Javier Zelaya

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)