Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

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

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mail	Address:	

## FLORIDA LIMITED LIABILITY CO. SBAF MORTGAGE FUND I/HOLDING - WTC DENVER LLC

Certificate of Status	0
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(850) 245-6051.

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: SBAF Mortgage Fund I/Holding - WTC Denver LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Liz Henderson

Name of Person

Sutherland Asbill & Brennan LLP

Firm/Company

999 Peachtree Street, NE, Suite 2300

Address

Atlanta, GA 30309

City/State and Zip Code

liz.henderson@sutherland.com

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

For further information concerning this matter, please call:

Liz Henderson

404

853-8000

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■\$125.00 Filing Fce

□\$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, PL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION F	OR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	For Es
The name of the Limited Liability Comp	any is:
SBAF Mortgage Fund l/Holding - WTC Denver LLC	
(Must end with the words "Limit	cd Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	<u> </u>
	the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1801 Hermitage Blvd.	1801 Hermitage Blvd
Suite 600	Suite 600
Tatinhasses, Ft. 32308	Tallahassee, FL 32308
	stered Office, & Registered Agent's Signature:  n Registered Agent, You must designate an individual or another  f the registered agent are:
CT Corporation System	Name
1200 South Pine Island Ro	
	reet address (P.O. Box NOT acceptable)
Plantation, FL 33324	•
	City, State, and Zip
liability company at the place designate registered agent and agree to act in this a all statutes relating to the proper and co	nd to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of mplete performance of my duties, and I am familiar with as registered agent as provided for in Chapter 608, F.S.

(CONTINUED)

Registered Agent's Signature (RSQUIRED)
Nathan S. Giffin Asst. Secretary

Page 1 of 2

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address;
MGRM ·	SBAF Mortgage Fund U-Holding, LLC
	1801 Hermitage Blvd., Suite 600
·	Tallahassee, FL 32308
• • • • • • • • • • • • • • • • • • •	
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E V: Effective date, if other than the date ective date is listed, the date must be r 90 days after the date of filling.)  EQUIRED SIGNATURE:  Signature of a member or (In accordance with section 608.408 constitutes an affirmation under the I am aware that any false information	an authorized representative of a member.  (3), Fiorida Statutes, the execution of this document penalties of perjury that the facta stated herein are true.  a submitted in a document to the Department of State

Page 2 of 2

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