13000062848

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Submode Emily Numb)
(Document Number)
(Bocament Number)
Codification of Oraco
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000247014500

04/29/13--01037--019 **125.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

13 APR 29 AM II: 40

1

APR 3 0 2013

T. HAMPTON

COVER LETTER

TO: **Registration Section Division of Corporations** St. Alban's Mortgage, 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: Wayne Ogg Name of Person St. Alban's Mortgage, LLC 375 Thistledown Way Address The Villages, FL 32612 City/State and Zip Code wayneogg@embarqmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: George Franjola, Esq. Name of Person Enclosed is a check for the following amount: **■**\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy

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

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: St. Alban's Mortgage, LLC.

ARTICLE II - Address

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

375 Thistledown Way The Villages, FL 32612

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

375 Thistledown Way The Villages, FL 32612

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Name:

Wayne Ogg

Florida street address:

375 Thistledown Way The Villages, FL 32612

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 Lignature

Article IV - Management (Check box if applicable.)

X The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

Signature of a member of 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.)

Wayne Ogg as Manager Typed or printed name of signee SECRETARY OF AMII: 40