

# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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

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SEP 27 2013

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### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT: SBAF Mortgage Fund I/Holding - Hughes 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:

# Liz Henderson Name of Person Sutherland Asbill & Brennan LLP Pirm/Company 999 Peachtree Street, NE, Suite 2300 Address Atlanta, GA 30309 City/Sinte 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 at 404 853-8000

Enclosed is a check for the following amount:

■\$125.00 Filing Fee □\$130.00 Filing Fee &

IS130.00 Filing Fee & US155.00 Filing Fee & Certificate of Status Certified Copy

(additional copy is enclosed)

☐ \$160.00 Filing Pee, Cartificate of Status & Certified Copy (edditional 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 VHolding - Hughes LLC (Must end with the words "Limited L	isbility Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address:	
The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1801 Hermitege Blvd.	1801 Hermitage Blvd
Sulta 600	State 800 (D.S. N
Tallahassee, FL 3230B	Tellahassee, FL 32308
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:
CT Corporation System	
<del></del>	me
1200 South Pine Island Road	
Florida street	address (P.O. Box NOT acceptable)
Plantation, FL 33324	FI.
City	, Slate, and Zip
	to accept service of process for the above stated limited in this cartificate, I hereby accept the appointment as

Registered Agent's Signature (REQUIRED)

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..

Ternell Kearney Asst. Secretary

(CONTINUED)

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- ·	Name and Address:
MGRM	SBAF Mortgage Fund I/Holding LLC
	1801 Harmitage Blvd., Suite 600
	Tellahassee, FL 32308
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	(a) (b)
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	1 <sup></sup>
	조건
LE V: Effective date, if other than the effective date is listed, the date must or 90 days after the date of filing.)	st be specific and cannot be more than five busi
REQUIRED SIGNATURE;	, A
<del></del>	T. Ruel
Dand:	To an authorized representative of a member.
Signature of a memb  (In accordance with section 60 constitutes an affirmation under I am aware that any false information to the section of	er or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State
Signature of a memb  (In accordance with section 60 constitutes an affirmation under I am aware that any false information to the section of	er or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.

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