

L14000162911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

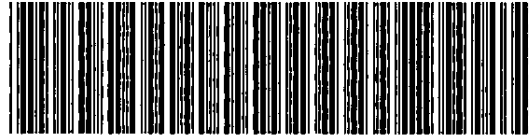
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100265401111

10/16/14--01026--010 \*\*130.00

FILED

14 OCT 16 PM 1:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch OCT 20 2014

October 10, 2014

Florida Department of State  
Registration Section  
Division of Corporations  
P O Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

Enclosed please find the Articles of Organization for National Mortgage Consultants LLC, a newly formed LLC to be registered in the state of Florida.

I am the duly authorized Registered Agent for National Mortgage Consultants LLC, and may be reached at 561-252-7236.

Sincerely,



Gary Fioretti

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: NATIONAL MORTGAGE CONSULTANTS, 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:

GARY FIORETTI

Name of Person

NATIONAL MORTGAGE CONSULTANTS, LLC

Firm/Company

8626 DAYSTAR RIDGE PT

Address

BOYNTON BEACH FLORIDA 33473

City/State and Zip Code

gfioretti59@yahoo.com

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

For further information concerning this matter, please call:

GARY FIORETTI at ( 561 ) 252-7236

Name of Person

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:

NATIONAL MORTGAGE CONSULTANTS, 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:

8626 DAYSTAR RIDGE PT  
BOYNTON BEACH, FLORIDA  
33473

8626 DAYSTAR RIDGE PT  
BOYNTON BEACH, FLORIDA  
33473

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

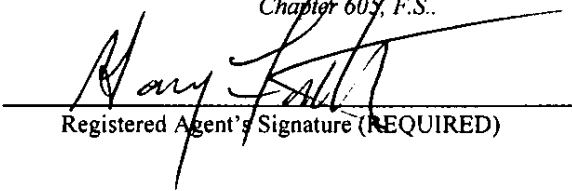
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

GARY FIORETTI  
Name  
8626 DAYSTAR RIDGE PT  
Florida street address (P.O. Box NOT acceptable)  
BOYNTON BEACH FL 33473  
City Zip

FILED  
14 OCT 16 PM 4:55  
SECRETARY OF STATE  
TALLAHASSEE, 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 605, F.S..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

Managing Member

**Name and Address:**

GARY FIORETTI

8626 DAYSTAR RIDGE PT

BOYNTON BEACH, FL 33473

Member

YVETTE FIORETTI

8626 DAYSTAR RIDGE PT

BOYNTON BEACH, FL 33473

14 OCT 16 PM 4:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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.)

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
**Signature of a member or an authorized representative of a member.**

(In accordance with section 605.0203 (1) (b), 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.)

GARY FIORETTI

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)**