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Special Instructions to	Filing Officer:	

Office Use Only



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EFFECTIVE DATE 01/01/16

x 0/11/18

## COVERLETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: Blanton's Mortgage Services, L Name of l	LC 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:
Gale E. Blanton	
	Name of Person
Blanton's Mortgage Services	
	Firm/Company
2707 124 <sup>th</sup> Ave E	
	Address
Parrish, FL 34219	
Galeblanton I I@gmail.com	City/State and Zip Code
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, ple	ase call:
Gale E Blanton  Name of Person	_at (941)417-2684 Area Code Daytime Telephone Number
1 44.00 0.12 0.50.1	Zayımıc Telephone Yumco.
Enclosed is a check for the following amount:	<b>\</b>
125.00 Filing Fee \$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, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street Address
New Filing Section Division of Corporations	New Filing Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLESOFORGANIZATIONFORFLORIDALIMITEDLIABILITYCOMPANY

Blanton's Mortgage			
(Must end v	vith the words "Limited	Liability Compa	ny, "L.L.C.," or "LLC.")
TICLE II - Address:			
mailing address and street ad	dress of the principal of	ffice of the Limite	ed Liability Company is:
<u>Principa</u>	l Office Address:		Mailing Address:
			agos couth a so
2707 124th Ave E			2707 124th Ave E
Parrish, FL 34219  TICLE III - Registered Age e Limited Liability Company ther business entity with an ac	nt, Registered Office, cannot serve as its own ctive Florida registratio	Registered Agen	Parrish, FL 34219
Parrish, FL 34219 TICLE III - Registered Age	nt, Registered Office, cannot serve as its own ctive Florida registratio	Registered Agent n.) agent are:	Parrish, FL 34219 gent's Signature:
TICLE III - Registered Age e Limited Liability Company ther business entity with an ac	nt, Registered Office, cannot serve as its own ctive Florida registratio	Registered Agent n.) agent are:	Parrish, FL 34219 gent's Signature:
TICLE III - Registered Age e Limited Liability Company ther business entity with an ac	nt, Registered Office, cannot serve as its own ctive Florida registratio	Registered Agent n.) agent are:	Parrish, FL 34219 gent's Signature:
TICLE III - Registered Age e Limited Liability Company ther business entity with an ac	nt, Registered Office, cannot serve as its own ctive Florida registration ddress of the registered Gale E. Blantor	Registered Agental.)  agent are:  Name	Parrish, FL 34219  ent's Signature:  You must designate an individual o
TICLE III - Registered Age e Limited Liability Company ther business entity with an ac	nt, Registered Office, cannot serve as its own ctive Florida registration ddress of the registered  Gale E. Blantor  2707 124th Ave	Registered Agental.)  agent are:  Name	Parrish, FL 34219  ent's Signature:  You must designate an individual o

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)

Page1 of2

	Name and Address: uthorized Member	
"MGR" = Mai		
MGR	Gale E. Blanton	
	2707 124th Ave E	_
	Parrish, FL 34219	_
AMBR	Charles R. Blanton	
	2707 124th Ave E	•
	Parrish, FL 34219	-
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		-
		_
		-
		-
	date, if other than the date of filing: <u>January 1, 2016 01/01/2016</u> (OPTIONAL)	zoh (
ffective date is li e of filing.) If the date inserte cument's effective	isted, the date must be specific and cannot be more than five business days prior to or 90 and in this block does not meet the applicable statutory filing requirements, this date will not be date on the Department of State's records.	·
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effective date is line of filing.)  If the date inserte cument's effective CLE VI: Other pro-	sisted, the date must be specific and cannot be more than five business days prior to or 90 and in this block does not meet the applicable statutory filing requirements, this date will not be date on the Department of State's records.  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes 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.	ot be

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

**ARTICLE IV-**

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) as