## 700119064

(Requestor's Name)
(Address)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
·
(Document Number)
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900299295529

2017 MAY 24 AM 11: 30 FILED

BAT HAY 24 AH ID: 46

C. GOLDEN MAY 2 4 2017

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 653549 7886375

**AUTHORIZATION:** 

COST LIMIT : \$ 125.00

ORDER DATE: May 22, 2017

ORDER TIME : 10:14 AM

ORDER NO. : 653549-010

CUSTOMER NO: 7

7886375

## DOMESTIC FILING

NAME:

CC1 FL REO LLC

EFFECTIVE	DATE
-----------	------

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

X PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT.

EXAMINER'S INITIALS:

SECRETARY OF STATE TALL/HASSEE, FLORID

OITHAY 24 AMIL:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICI	ÆI-	Name:
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The name of the Limited Liability Company is:

2017 MAY 24 AM 11: 30

				111111 00
CC1 FL REO LLC				SECRETARY OF STATE
	in the words "Limited	Liability Compar	y, "L.L.C.," or "LLC.")	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II - Address: The mailing address and street ad	dress of the principal o	office of the Limit	ed Liability Company is:	
<u>Principa</u>	Office Address:		Mailing Addr	ress:
1235-E East Blvd.			235-E East Blvd.	
Suite 188			uite 188	
Charlotte, NC 28203	<u> </u>		harlotte, NC 28203	<del></del>
(The Limited Liability Company another business entity with an active rame and the Florida street a	ctive Florida registratio	on.) d agent are:	nt. You must designate an in	dividual or
	1201 Hays Street			
	Florida street addres	ss (P.O. Box <u>NO</u>	Cacceptable)	
	Tallahassee	FL	32301	
	City	State	Zip	
Having been named as registered a place designated in this certificate, further agree to comply with the pro am familiar with and accept the obt	I hereby accept the app	pointment as regis relating to the pro as registered age	tered agent and agree to act per and complete performan nt as provided for in Chapte	in this capacity. I

(CONTINUED)

Page 1 of 2

Title:	. 13.4	Name and Address:
"AMBR" = Auth		
"MGR" = Manag MGR		CC1 HOLDINGS LLC
MOR	<del></del>	1235-E East Boulevard, Suite 188
		Charlotte, NC 28203
	<del></del>	
	<del></del>	
EV: Effective da ctive date is liste f filing.)	ate, if other than the date o	f filing: (OPTIONAL) cific and cannot be more than five business days prior to or 9
ective date is lister f filing.) the date inserted	ate, if other than the date o	eific and cannot be more than five business days prior to or 9
EV: Effective date is listed filing.) the date inserted nent's effective date.	ite, if other than the date or ited, the date must be specific this block does not melate on the Department of	eific and cannot be more than five business days prior to or 9
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**ARTICLE IV-**

Page 2 of 2

ZOITHAY 24 AN II: 30
SECRETARY OF STATE