119000164736

| (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: |
| Add EIN: |
| 84-2305519 |
| |

Office Use Only



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FILING CANCELLED
DUE TO RETURNED CHECK

07/08/19--01001--007 **185.00

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COVER LETTER

TO: New Filing Section Division of Corporations

FILING CANCELLED DUE TO RETURNED CHECK

| SUBJECT: Credit Consortium LC Name of Limited Liability Company |
|--|
| 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: |
| Tyler Anderson Name of Person |
| |
| FIN-84-2305519 |
| |
| 801 International Parkway Suite 500 |
| Aduress |
| TyanderSon St Ogarail. com E-mail address: (15 be used for future annual report notification) |
| Tranderson Stolaranil com |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Tyler Andorson 11321) H44-3189 |
| Tyler Andelon at (321) H44-3189 Name of Person Area Code Daytime Telephone Number |
| |
| Enclosed is a check for the following amount: |
| S125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy |

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing 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 1 - Name:

| The name of the Limited Liability Company is: | F | ILING CANCELLED |
|--|---|--|
| | Г | OUE TO RETURNED CHECK |
| Credit Consortium (Must contain the words) | m L.L.C. | |
| (Must contain the words | Limited Liability Compar | ny, "L.L.C" or "LL.C.") |
| ARTICLE II - Address: The mailing address and street address of the p | rincipal office of the Limi | ted Liability Company is: |
| Principal Office Add | | Mailing Address: |
| Rol International Parker | ~ 4£ 500 5 | ane |
| Bol International Parkers | h | |
| | | |
| ARTICLE III - Registered Agent, Registere | d Office, & Registered A | gent's Signature: |
| ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve another business entity with an active Florida.) The name and the Florida street address of the | is its own Registered Age registration.) | gent's Signature: nt. You must designate an individual or |
| (The Limited Liability Company cannot serve another business entity with an active Florida.) The name and the Florida street address of the | as its own Registered Age registration.) registered agent are: | gent's Signature: nt. You must designate an individual or |
| (The Limited Liability Company cannot serve another business entity with an active Florida.) The name and the Florida street address of the | is its own Registered Age registration.) | gent's Signature: nt. You must designate an individual or |
| (The Limited Liability Company cannot serve another business entity with an active Florida. The name and the Florida street address of the | is its own Registered Age registration.) registered agent are: | Nay Sails 500 |
| (The Limited Liability Company cannot serve another business entity with an active Florida. The name and the Florida street address of the | is its own Registered Ager registration.) registered agent are: Industry Name | Nay Sails 500 |

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.,

(CONTINUED)

Registered Agent's Signature (REQUIRED)

FILING CANCELLED DUE TO RETURNED CHECK

ARTICLE IV-

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

| Title: "AMBR" = Authorized Member | Name and Address: | | |
|---|--|--|--|
| "MGR" = Manager | Tyler Anderson Soi International Parkway Sitesood half many 172 32746 | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| (Use attachment if necessary) | | | |
| the date of filing.) | fic and cannot be more than five business days prior to or 90 days after at the applicable statutory filing requirements, this date will not be listed as | | |
| Score consulting and all les | divelopment, credit repair & credit al and legitarde business practizes. | | |
| REQUIRED SIGNATURE: | R | | |
| This document is executed I am aware that any false in | ber or an authorized representative of a member. I in accordance with section 605,0203 (1) (b), Florida Statutes, aformation submitted in a document to the Department of State elony as provided for in s.817.155, F.S. | | |
| Tyles Ar | Typed or printed name of signee | | |

 $\frac{Filing\ Fees:}{\text{S125.00 Filing Fee}\ for\ Articles\ of\ Organization\ and\ Designation\ of\ Registered\ Agent}$

\$ 30.00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)