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Velvita Loans LLC			-			
Please Debit FCA000	000003 For: 12	25				
Thank you Seth Neel	ev					
1-4-1	<u></u>	· · · · · · ·	-			
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				LTD Partnership File	-	
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				UCC 11 Search		
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Walk-In	Will Pick Up			Courier		

COVER LETTER

CHIP IE/CO	VELVITA LOANS LLC		
SUBJECT	Name of Li	mited Liability Company	
The enclos	sed Articles of Organization and fee(s) as	re submitted for filing.	
Please retu	ım all correspondence concerning this m	natter to the following:	
	George G. Pappas		
		Name of Person	
	Pappas Law & Title		
	······································	Firm/Company	
	1822 N. Belcher Rd., Suite 200		
		Address	
	Clearwater, Fl 33765		
	george@pappaspa.com	City/State and Zip Code	
		for future annual report notification)	
For further i	nformation concerning this matter, pleas	•	
	- 11	27 447-4999	
	-	Area Code Daytime Telephone Number	-
Enclosed is	s a check for the following amount:		
	V	Certified Copy Certificate (additional copy is enclosed) Certified C	Filing Fee, e of Status & Copy opy is enclosed
	Mailing Address New Filing Section	Street Address New Filing Section Division	
	Division of Corporations P.O. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32314	Tallahassee, FL 32303	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

VELVITA LOAN				
(Must co	ontain the words "Limited	Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street	t address of the principal c	office of the Limited	Liability Company is:	
Principal Office Address:			Mailing Address:	
1822 N. Belcher Rd., Suite 200 Clearwater, FL 33765		Sam	e	<u> </u>
•	n active Florida registratio	on.)		
·	et address of the registered	•		-;
·	<u> </u>	•	 	, - <u>1</u> ,
·	et address of the registered	d agent are: Name		, 12, (1)
·	et address of the registered	d agent are: Name . Suite 200	cceptable)	, rs. (
·	et address of the registered George G. Pappas 1822 N. Belcher Rd.	d agent are: Name . Suite 200	cceptable) 33765	- 17 17
The name and the Florida street the name and the Florida street the name as registered to the name and the Florida street to the name and the nam	George G. Pappas 1822 N. Belcher Rd. Florida street addres Clearwater City	Name , Suite 200 ss (P.O. Box NOT a	33765 Zip	7.3 7.2 7.1)

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager GEORGE G. PAPPAS MGR 1822 N. BELCHER RD., SUITE 200 CLEARWATER, FL 33765 ATHENA PAPPAS 1822 N. BELCHER RD., SUITE 200 MGR. CLEARWATER, FL 33765 W<u>ILLIAM P</u>APPAS MGR 1822 N. BELCHER RD., SUITE 200 CLEARWATER, FL 33765 <u>M</u>GR GEORGE E. PAPPAS 1822 N. BELCHER RD., SUITE 200 CLEARWATER, FL 33765 (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.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE:

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.

GEORGE G. PAPPAS

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)
- S 5.00 Certificate of Status (Optional)