Division of Corporations

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(((H210001494953)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

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Foreign Limited Liability Company Mable Loans LLC

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COVER LETTER

	Mable Loans LLC					
SUBJECT:		Name of Lim	ited Liability C	Company		
The enclosed Existence, ar	d "Application by Fore nd check are submitted	ign Limited Liability Company to register the above reference	for Authoriza d foreign limit	tion to Transact ed liability comp	Business in Florida," pany to transact busin	Certificate of ess in Florida
lease return	all correspondence co	oncerning this matter to the following	owing:			
	Cheyenne Mosel	ley				
		Name	of Person			-
	Legalzoom.com.	, Inc.				
		Firm/	Company	 · · · · · · · · · · · · · · · · · ·	<u>-</u>	
	101 N Brand Blv	vd 11th Fl				
		Α	ddress			
	Glendale, CA 91	1203				
		City/State	and Zip Code			
	theultimateorigina	ntor@gmail.com				
		E-mail address: (to be used for	r future annual	report notificati	on)	
For further is	nformation concerning	this matter, please call:				
Ch	eyenne Moseley	а	800 t (773-0888		
	Name of	Contact Person	Area Code	Daytime 1	Telephone Number	
Div Re _E P.C	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 llahassee, FL 32314			STREET ADD Division of Con Registration Se Clifton Buildin 2661 Executive Tallahassee, Fl	rporations ction g : Center Circle	;
Enc Ple	closed is a check for th ase make check payab	e following amount: le to: FLORIDA DEPARTMI	ENT OF STA	re		
_	\$125.00 Filing Fee	☐ \$130.00 Filing Fee &	\$155.00	Filing Fee & ed Copy	S160.00 Filing of Status & Cer	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

		THE POST OF ALL PARTY OF THE PROPERTY OF THE PROPERTY OF A PROPERTY OF THE PRO	ki in <i>im</i> entika
COMPLIANCE WITH SEC MPANY TO TRANSACT BL	TION 605.0902, FLORIDA STATUTES, TI ISINESS IN THE STATE OF FLORIDA:	HE FOLLOWING IS SUBMITTED TO REGISTER A FOREIG	שאנו עבוואינו א
Mable Loans LLC	Career In The Commission of Contract		
(Name of Foreign	Limited Liability Company; must include "I	Limited Liability Company," "L.L.C.," or "LLC.")	
•			
		s in Florida. The alternate name must include "Limited Liability Company,"	
rime mandingraphe' earth fireannre is	attle produced tox cuc brakense of concerning occurren		
/irginia		3. (FEI number, if applicable)	
(Jurisdiction under the law of w	nich foreign hunted liability conquiny is organized)	(FEI number, if applicable)	
-	(Date first transacted business in Florida, if p (See sections 603 0904 & 605,0905, F.S. to i	nior to registration.) determine penalty liability)	
11250 Roger Bacon D	r	11250 Roger Bacon Dr	.
(Street Address of l	riscipi Office)	6. (Mailing Address)	<u> </u>
(3020) (10212) (1			
Reston, VA 20190			
KC3()1, V/ 20170		Reston, VA 20190	
	is of Florida registered agent: (P.O.		
	is of Florida registered agent: (P.O. UNITED STATES CORPORAT	. Box NOT acceptable)	
Name and street addres		. Box NOT acceptable)	
Name and <u>street addres</u> Name:	UNITED STATES CORPORAT	Box NOT acceptable) TON AGENTS, INC.	
Name and <u>street addres</u> Name:	UNITED STATES CORPORAT 5575 S. Semoran Blvd., Suite 36	Box NOT acceptable) TON AGENTS, INC.	

8 For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: Gerald Hanson Manager | Name: _____ Manager Address: ____ Address: Member ■ Member Reston, VA 20190 Authorized ☐ Authorized Person Person Other___ Other_____ Other____ Other____ Name: _____ Name: _____ Manager Address: ☐ Member Member Address: ☐ Authorized Authorized Person Person Other___ ____Other_____ Other____ Manager Name: _____ Manager Address: Member Address: Member ☐ Authorized Authorized Person Person Other____ Other__ Other_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. 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 \$.817.155, F.S. amo Signature of an authorized person Gerald Hanson Typed or printed name of signee

Commonboealth of Hirginia



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State Corporation Commission

CERTIFICATE OF FACT

1 Certify the Following from the Records of the Commission:

That Mable Loans LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the limited liability company was formed on December 19, 2019; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

April 14, 2021

Bernard J. Logan, Clerk of the Commission