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(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phone	+)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to WIV-243° Ce(1.	Filing Officer:	
	Office Use On	lv



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April 1, 2016

SHAUN MURPHY 2105 WATERVIEW PARKWAY RICHARDSON, TX 75080-2292

SUBJECT: SERVICE FIRST HOME LOANS, LP

Ref. Number: W16000024278

We have received your document for SERVICE FIRST HOME LOANS, LP and your check(s) totaling \$. However, the document has not been filed and is being retained in this office for the following:

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 816A00006713

COVER LETTER

TO: Registration Division of C			
SUBJECT: SFM	•		
SUBJECT:		d Partnership or Lin	nited Liability Limited Partnership
The enclosed amend	ment and fee(s) are sul	bmitted for filing	3.
Please return all corr	respondence concernin	g this matter to:	
Shaun Murp	hy		
	Contact Person		-
SFMC, LP			
	Firm/Company		-
2105 Water	view Pkwy		_
Richardson T	Address TX 75080-2292	1	
	City, State and Zip Code	· 	-
	•	oom	
	ervicefirstmtg be used for future annual r		-
For further informati	on concerning this ma	tter, please call:	
Shaun Murp	_	214	、576-2900
Name of Cor	<u></u>	at (Daytime Telephone Number
Enclosed is a check t	for the following amou		
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filin and Certified Cop	· •
STREET ADDRES	S:		ING ADDRESS:
Registration Section Registration Section			
Division of Corporations Division of Corporations Clifton Building P. O. Box 6327			
2661 Executive Center Circle		Tallahassee, FL 32314	
Tallahassee, FL 323		2 333-333	,

AFFIDAVIT BY GENERAL PARTNER OF A FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO ADOPT AN ALTERNATE NAME IN THE STATE OF FLORIDA

Because the name of the limited partnership or limited liability limited partnership is not
available in Florida, SFMC, LP (Name of foreign LP or LLLP in home state)
an out-of-state limited partnership or limited liability limited partnership, hereby adopts
the following alternate name for the purpose of transacting business in Florida:
Service First Home Loans, LP
(Alternate name adopted for use in the state of Florida, including acceptable suffix.*)
Date: 4/12/2016

60.

(Signature of General Partner)

Shawn Browssard, President of Ameriquest, Inc.
(Printed Name of General Partner)

* Acceptable Limited Partnership suffixes include: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes include: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

Filing Fee: \$52.50

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