66000069131

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R. HUNT 06/13/23

COVER LETTER

TO: F	Registration Se Division of Cor	ction porations		
CUD IEC	Modern Mo	ortage LLC name change to 1st	TSP LLC	
SUBJEC	l:	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please reti	urn all correspo	ndence concerning this matter	to the following:	
		Joseph Sharon		
			Name of Person	
			Firm/Company	
		9083 Park Avenue		
			Address	
		Manassas / VA 20110		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report not	(fication)
For furthe	r information c	oncerning this matter, please ca	all:	
Joseph Sł	naron		904 806-3692 at ()	
	Name o	l Person	at () Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Modern Mortgage LLC				
(<u>Name of the Limited L</u> (A F	iability Compa Iorida Limited I	ny as it now appears on our records.) Jability Company)		
The Articles of Organization for this Limited Liabil Florida document number L06000069131	were filed on July 10, 2006	_ and assign	ed	
his amendment is submitted to amend the following	ıg:			
A. If amending name, enter the new name of the	e limited liabi	ility company here:		
1st TSP LLC				
he new name must be distinguishable and contain the words	"Limited Liabil	lity Company," the designation "LLC" or the abbre	viation "L.L.C.	
Inter new principal offices address, if applicable	.: ::	9083 Park Avenue, Manassas, VA 20110	5.5	
Principal office address MUST BE A STREET ADDRESS)			5.	
				<u></u>
			 ಒ	
nter new mailing address, if applicable:		9083 Park Avenue, Manassas, VA 20110		
Aailing address MAY BE A POST OFFICE BOX		: 72	•	
	_		۲. (
3. If amending the registered agent and/or regis gent and/or the new registered office address he Name of New Registered Agent:	ere:	address on our records, enter the name o	f the new re	giste
New Registered Office Address: 7	901 4th St N S			
		Enter Florida street address		
<u>s</u>	t. Petershurg	, Florida ³³⁷⁰²		
		Circ	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Nat Smith

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Cynthia Sharon	9083 Park Avenue, Manassas, VA 20110	≘ Add
			□Remove
			□Add
			□Remove
			□Change
			🗆 Add
			□ Remove
			□Change
			□Add
			□ Remove
			□ Change
			□Remove
			□Change
			□Remove

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<u> </u>
	<u>, </u>
	· · · · · · · · · · · · · · · · · · ·
Note:	tive date, if other than the date of filing:
the reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	Tensol M. My
	Signature of a member of authorited representative of a member
	Joseph Sharon Typed or printed name of signee

Filing Fee: \$25.00