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COVER LETTER

	distration Section dision of Corpora				
SUBJECT.	Capital Hom	e Mortgage LLC			
SUBSECT.	<u> </u>		ted Liability Company)		
The enclosed	l Articles of Amer	ndment and fee(s) are subr	mitted for filing.		
Please return	all corresponden	ce concerning this matter t	to the following:		
	В	etsy Ramirez			
			(Name of Person)		
Capital Home mortgage LLC (Firm/Company)					
103 Golden Crest Ct.					
(Address) Winter Springs, FI 32708					
(City/State and Zip Code)					
For further in	nformation concer	ming this matter, please ca	JI:		
Betsy Ramirez			at (407) 902-4084	·····	
(Name of Person) (Area Code & Daytime Telephone Number)					
				•	
Enclosed is a	check for the fol	lowing amount:			
√ \$25.00 Fi	ling 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 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Ramirez Mortgage Group	LLC		
(<u>Name of the Limite</u> ()	d Liability Company as it now appea A Florida Limited Liability Company)	rs on our records.)	
		(00/000	
The Articles of Organization for this Limited I	Liability Company were filed on 10	/20/2006 and assigned	
Florida document number <u>L06000102296</u>	•		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, <u>enter the new name o</u>	of the limited liability company he	<u>re</u> :	
Capital Home Mortgage LLC			
The new name must be distinguishable and end w 'L.L.C."	ith the words "Limited Liability Comp	any," the designation "LLC" or the abbreviation	
B. If amending the registered agent and registered agent and/or the new registered of	•	our records, enter the name of the new	
Name of New Registered Agent:	Betsy Ramirez		
New Registered Office Address:	103 Golden Crest Ct.		
(Enter Florida street address)			
	Winter Springs	, Florida <u>32708</u>	
	(City)	(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 608, 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.

(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Type of Action** <u>Title</u> Name | **Address** MGR_ **Betsy Ramirez** 103 Golden Crest Ct **✓** Add Winter Springs, Fl 32708 Remove Frankie Ramirez MGR 103 Golden Crest Ct Winter Springs, Fl 32708 **✓** Add Remove ∏Add Remove ∏Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated January 30 2008 Signature of a member or authorized representative of a member **Betsy Ramirez** Typed or printed name of signee

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Filing Fee: \$25.00