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SECRETARY OF STATE
TALLAHASSEE, FLORID

T. CLINE

JAN 1 1 2008

EXAMINER

08/2035

COVER LETTER

TO: Registratio Division of	n Section f Corporations				
SUBJECT: Struc	ctured Servicing, LLC	,			
	(Name o	of Limited Liability Co	mpany)		
Dear Sir or Madam:					
The enclosed Article	es of Correction and fee(s) a	re submitted for filing.	•		
Please return all cor	respondence concerning this	matter to the followin	g:		
Angie McRae					
	(Name of Person)		_		
Structured Servi	icing, LLC			•	
	(Firm/Company)		_		
1021 Oak Stree	t		_		
	(Address)				
Jacksonville, FL	. 32204		_	200 TAI	
	(City/State and Zip Code)		_	ECRI B JS	
For further informat	tion concerning this matter, p	please call:		HAS FTAF	Andrews.
Dan Armstrong		at (904) 355-1831	2008 JAN 10 AM 11: 06 SECRETARY OF STATE TALLAHASSEE, FLORIO	
	lame of Person)		ଝ Daytime Telephone Number)	Y OF STATE SEE, FLORIO	(
STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, Florida	tions ter Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	06 RIDA	
Enclosed is a check	for the following amount:				
☑ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy		

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST Structure	The name of the limited liability company is:
SECO:	
<u>(CH</u>	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT
7	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Please change the TITLE of Santa Rosa Island Company Inc. from MGRM to MGR. It is only the Manager
	and not a Managing Member.
	2008 SE 108
	OR PER S
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:
	TATE OF
Dated:	January 8 , 2008
	By: Santa Resa Island Company, Manager By: Daniel Huntwy, VP Admin Signature of a member or authorized representative of a member
	Dan Armstrong
	Typed or printed name of signee
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

Electronic Articles of Organization For Florida Limited Liability Company

L08000002035 FILED 8:00 AM January 07, 2008 Sec. Of State ncausseaux

Article I

The name of the Limited Liability Company is: STRUCTURED SERVICING, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

1021 OAK STREET JACKSONVILLE, FL. 32204

The mailing address of the Limited Liability Company is:

1021 OAK STREET JACKSONVILLE, FL. 32204

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

SANTA ROSA ISLAND COMPANY INC. 1021 OAK STREET JACKSONVILLE, FL. 32204

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: DANIEL P ARMSTRONG

Article V

The name and address of managing members/managers are:

Title: MGRM SANTA ROSA ISLAND COMPANY INC. 1021 OAK STREET JACKSONVILLE, FL. 32204

Article VI

The effective date for this Limited Liability Company shall be: 01/01/2008

Signature of member or an authorized representative of a member Signature: DAVID K SURFACE

.08000002035 Sec. Of State neausseaux