

M02000000469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

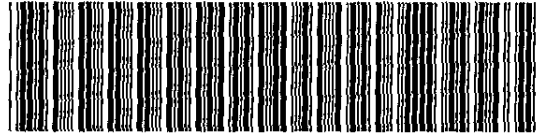
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TALLAHASSEE, FLORIDA

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 157962 5142120

AUTHORIZATION : *Patricia P. [unclear]*

COST LIMIT : \$ ~~3500~~ *2500*

ORDER DATE : January 21, 2005

ORDER TIME : 2:17 PM

ORDER NO. : 157962-005

CUSTOMER NO: 5142120

CUSTOMER: Ms. Suzi Gruver-macx2401-05w
Wells Fargo Home Mortgage
1 Home Campus

Des Moines, IA 50328-0001

FILED
05 JAN 24 PM 3:52
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: DELUCA-REALEN MORTGAGE, LLC

XXX__ LLC

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER: _____

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO
FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: DELUCA-REALEN MORTGAGE, LLC
2. Jurisdiction of its organization: DELAWARE
3. Date authorized to do business in Florida: 2/22/2002

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SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? JANUARY 21, 2005
5. New name of the limited liability company: D H FINANCIAL, LLC
6. If the amendment changes the period of duration, indicate new period of duration: _____
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: _____
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of member or the authorized representative of a member

KAROLYN BAKER, AUTHORIZED PERSON OF MEMBER

Typed or printed name of signee

Filing Fee: \$25.00

JAN 24. 2005 1:00PM

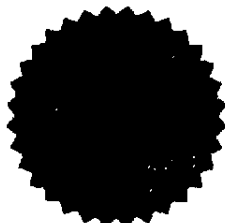
NO. 9382 P. 2

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "DELUCA-REALEN MORTGAGE, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "D H FINANCIAL, LLC", THE TWENTY-FIRST DAY OF JANUARY, A.D. 2005, AT 4:59 O'CLOCK P.M.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

3488240 8320

AUTHENTICATION: 3635128

050055695

DATE: 01-24-05