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(	Requestor's Name)	
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(	City/State/Zip/Phone #)	
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Special Instructions	to Filing Officer:	
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CT 1203 Governors Square Blvd. Tallahassee, FL 32301-2960 850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

April 29, 2009

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301



Re: Order #: 7543212 SO

Customer Reference 1: None Given Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Magnolia Mortgage Company, L.L.C. (MS) Misc - Foreign L.C. Filing - File Affidavit for DBA Name Florida



Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan
Senior Fulfillment Specialist
Connie.Bryan@wolterskluwer.com

## TICED

## WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managin	g
Members of Magnolia Mortgage Company, LLC (Name of Limited Liability Company)	,
(Name of Emilied English Company)	
a limited liability company duly organized and existing under the laws of Acc	2009 APR 29
Mississippi AR	PR
(State or Country of Organization)	29
Because the name of this foreign limited liability company does not satisfy here.	PH W
requirements of the s. 608.406, F.S., the limited liability company hereby adapts	ယ္ <sup>th©</sup>
following name to transact business in the state of Florida:	
Magnolia Mortgage Company of AL, LLC	
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)	<u> </u>
Date: 4/21/2009	
Signature(s) of Manager(s) and/or Managing Member(s):	
Janes Tenty wilker	
/	
	<del></del>