

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614) 280-3338
Fax Number : (954) 203-0845

Please honor original
date 09/06/2019

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MORTGAGE SERVICES III, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

2019 SEP 12 4:11:32

FILED
19 SEP -6 PM 8:35
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

Please honor original date 09/06/2019

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: Mortgage Services III, L.L.C.

Enter new principal office address, if applicable: _____

(Principal office address
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____

(Mailing address
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M09000000124

3. Jurisdiction of its organization: Illinois

4. Date authorized to do business in Florida: 01/09/2009

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: First State Mortgage Services, LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, Florida _____
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 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.

If Changing Registered Agent, Signature of New Registered Agent

19 SEP -6 PM 8:40
TALLAHASSEE, FLORIDA

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove

9. Attached is a certificate, if required: 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.

Tim McConville

Signature of the authorized representative

Timothy J. McConville

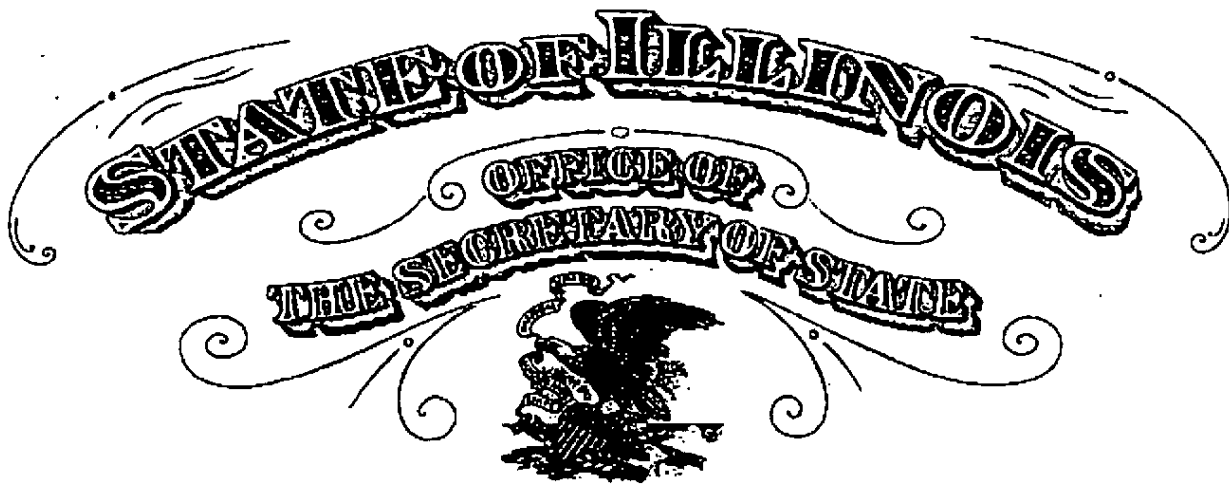
Typed or printed name of signee

Filing Fee: \$25.00

File Number

0158728-5

19 SEP -6 PM 8:40
STATE OF ILLINOIS
TALLAHASSEE, FLORIDA



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

MORTGAGE SERVICES III, L.L.C., HAVING ORGANIZED IN THE STATE OF ILLINOIS ON AUGUST 4, 2005. THE LIMITED LIABILITY COMPANY CHANGED THEIR NAME TO FIRST STATE MORTGAGE SERVICES, LLC, ON AUGUST 2, 2019, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING OF THE ARTICLES, PAYMENT AND IS ORGANIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 5TH day of SEPTEMBER A.D. 2019 .

Jesse White

Form **LLC-5.25**

July 2017

Secretary of State
Department of Business Services
Limited Liability Division
601 S. Second St., Rm. 331
Springfield, IL 62758
217-824-8008
www.cyberdriveillinois.com

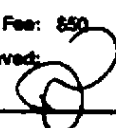
Payment may be made by check
payable to Secretary of State. If
check is returned for any reason this
filing will be void.

Illinois
Limited Liability Company Act
Articles of Amendment

SUBMIT IN DUPLICATE

Type or print clearly.

Filing Fee: \$50

Approved: 

FILE # 01587285

This space



LC0304511

FILED

AUG - 3 2019

JESSE WHITE
SECRETARY OF STATE1. Limited Liability Company name: Mortgage Services III, LLC.

2. Articles of Amendment effective on:

☐ the file date☒ a later date (not to exceed 30 days after the file date) September 1, 2019
Month, Day, Year

3. Articles of organization are amended as follows (check applicable item(s) below):

- ☐ a) Admission of a new manager (give name and address below)*
☐ b) Withdrawal of a manager (give name below)
☐ c) Change in address of the office at which the records required by Section 1-40 of the Act are kept (give new address, a P.O. Box alone or C/O is unacceptable)
☐ d) Change of registered agent and/or registered agent's office (give new name and/or address below, address change to P.O. Box alone or C/O is unacceptable)
☐ e) Change in the Limited Liability Company's name (give new name below)**
☐ f) Change in date of dissolution (state perpetual or date of dissolution below)
☐ g) Establish authority to issue series (fee \$300, see NOTE)
☐ h) Other (give information in space below)*

* Only managers and any member with the authority of manager are required to be reported.

Additional Information:

PAID
AUG 05 2019
DEPARTMENT OF
BUSINESS SERVICES

**New name of LLC (as changed): First State Mortgage Services, LLC

A professional LLC registered with the Illinois Department of Financial and Professional regulations must contain the term Professional Limited Liability Company, PLLC or P.L.L.C. in its name. The specific professional service must also be stated in its purpose.

(continued)

LLC-525

1. The amendment was approved in accordance with Section 5-25 of the Illinois Limited Liability Company Act.
3. I affirm, under penalties of perjury, having authority to sign hereto, that these Articles of Amendment are to the best of my knowledge and belief, true, correct and complete.

Dated: July 31 2019
Month/Day Year
Tim McConville
Signature
Tim McConville, Manager
Name and Title (type or print)

If applicant is signing for a company or other entity,
state name of company or entity.

NOTE:

The following paragraph is adopted when Item 3g is checked:

The operating agreement provides for the establishment of one or more series. When the company has filed a Certificate of Designation for each series, which is to have limited liability pursuant to Section 37-40 of the Illinois Limited Liability Company Act, the debts, liabilities and obligations incurred, contracted for or otherwise existing with respect to a particular series shall be enforceable against the assets of such series only, and not against the assets of the Limited Liability Company generally or any other series thereof, and unless otherwise provided in the operating agreement, none of the debts, liabilities, obligations or expenses incurred, contracted for or otherwise existing with respect to this company generally or any other series thereof shall be enforceable against the assets of such series.

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19 SEP -6 PM 8:
JANUARY 11, 2019