(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
(Becament Names)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:  LAZZETTZ  Cert. F. Cark recieved on today  Via emapl. 4/20/23  V.W.		
Via ema?1. 4/20/23		

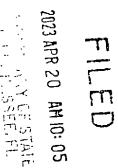
Office Use Only



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4/25/23 V.LN



# **COVER LETTER**

	_		Section Corporations			
SUBJE	CT:	KDD L	ending LLC			
			Name of Forei	gn Limited Lia	bility Co	mpany
Dear Sir	r or M	ladam:				
The enc	losed	applic	ation, certificate and fee(s	) are submitted	l for filing	<u></u>
Please r	eturn	all cor	respondence concerning th	his matter to th	e followi	ng:
Debbi Tr	an					
			Name of Person	,		
KDD Lei	nding	LLC				
			Firm/Company			
2301 W.	Ander	son Lar	ne Suite P			
			Address			
Austin, I	IX <b>7</b> 87	157				
			City/State and Zip Coo	de		
debbi_tra						
E-ma	il add	ress: (t	o be used for future annua	al report notific	ation)	
For furth	her in	format	ion concerning this matter	r, please call:		
Debbi Tr	ran			at (	)	133
		Nam	e of Person	Area Cod	le & Dayt	time Telephone Number
		2 Addr			Street A	
Registration Section				_	ration Section	
Division of Corporations					on of Corporations	
P.O. Box 6327 Tallahassee, FL 32314					entre of Tallahassee	
	Tallal	nassee,	, FL 32314			J. Monroe Street, Suite 810 assee, FL 32303
	Enclo	sed is	a check for the following	g amount:		
<b>■\$2</b> 5 F	iling	Fee	☐ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Certified	-	☐ \$60 Filing Fee,  Certificate of Status &  Certified Copy
CDAPAGE	(() () -					Confined Copy

# FILED

# 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 of	on the records of the Florida	Department of
State: KDD Lending, LLC	<u></u>	
Enter new principal office address, if applicable:		
( <u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u> )		202 SS
Enter new mailing address, if applicable:  (Mailing address  MAY BE A POST OFFICE BOX)		10: 05
2. The Florida document number of this limited liab	ility company is: M22000018	718
3. Jurisdiction of its organization: Texas		
4. Date authorized to do business in Florida: $\frac{12/07}{1}$	2022	
SECTION II (5-9 complete only the applicable ch		
5. New name of the limited liability company: Safe (must o	eguard Mortgage LLC contain "Limited Liability Co	ompany, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted fopy of the written consent of the managers or manamust contain "Limited Liability Company," "L.L.C.	aging members adopting the	business in Florida and attach a alternate name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office ade	d officer address on our recordress here.	ds, enter the name of the new
Name of New Registered Agent:		<del></del>
New Registered Office Address:	Enter Flori	da Street Address
		. Florida
	City	Florida Zip Code
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper a and accept the obligations of my position as registe document is being filed to merely reflect a change in liability company has been notified in writing of this	t and agree to act in this cape and complete performance of red agent as provided for in a the registered office addres	my duties, and Lam familiar with — Chapter 605, F.S. Or, if this

tle/ Capacity	<u>Name</u>	Address T	ype of Actio
			□Add
			□Remo
			□Add
			□Remo
			□Add
			□Reme
			□Add
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			□ Add
aforementioned an	icate, if required: no more than 9 nendment(s), duly authenticated but he law of which this entity is org	by the official having custody of records in the	⊡Rem

Filing Fee: \$25.00

utions Section Jane N

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State

# Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Safeguard Mortgage LLC (file number 804287821), a Domestic Limited Liability Company (LLC), was filed in this office on October 26, 2021.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 25, 2023.



gave Helson

Jane Nelson Secretary of State

. .

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State

# Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the attached is a true and correct copy of each document on file in this office as described below:

Safeguard Mortgage LLC Filing Number: 804287821

Certificate of Amendment January 10, 2023

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 23, 2023.



gave Helson

Jane Nelson Secretary of State

Form 424 (Revised 05/11)

Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555 FAX: 512/463-5709

Filing Fee: See instructions

#### Certificate of Amendment

This space reserved for office use.

#### **Entity Information**

The name of the filing entity is:	
KDD Lending, LLC	
State the name of the entity as currently shown of the entity, state the old name and not the new	in the records of the secretary of state. If the amendment changes the name w name.
The filing entity is a: (Select the appropriate	entity type below.)
For-profit Corporation	Professional Corporation
☐ Nonprofit Corporation	Professional Limited Liability Company
Cooperative Association	☐ Professional Association
Limited Liability Company	☐ Limited Partnership
The file number issued to the filing ent	ity by the secretary of state is: 804287821
The date of formation of the entity is:	10/26/2021

#### Amendments

#### 1. Amended Name

(If the purpose of the certificate of amendment is to change the name of the entity, use the following statement)

The amendment changes the certificate of formation to change the article or provision that names the filing entity. The article or provision is amended to read as follows:

The name of the filing entity is: (state the new name of the entity below)

Safeguard Mortgage LLC

The name of the entity must contain an organizational designation or accepted abbreviation of such term, as applicable.

#### 2. Amended Registered Agent/Registered Office

The amendment changes the certificate of formation to change the article or provision stating the name of the registered agent and the registered office address of the filing entity. The article or provision is amended to read as follows:

Form 424 6

(Corr		egistered Agent B, but not both. Also co	omplete C.)
A. The registered agent is an organization (cannot be entity named above) by the name of:			
OR B. The registered agent is a	ın individual re	esident of the state v	whose name is:
First Name	M.I.	Last Name	Suffix
The person executing this instr has consented to serve as registe		that the person des	signated as the new registered agent
C. The business address of the	registered age	nt and the registered	office address is:
2301 Anderson Lane Suite P		Austin	TX 78757
Street Address (No P.O. Box)		City	State Zip Code
3. Ot	her Added, A	altered, or Deleted	Provisions
is insufficient, incorporate the addition form for further information on format	nal text by provid t.	ding an attachment to th	space provided below. If the space provided sis form. Please read the instructions to this
Text Area (The attached addendum, if any, i	is incorporated here	ein by reference.)	
Add each of the following p reference of the added provision			ation. The identification or
		1	The state of the s
reference of the altered provisio			nation. The identification or as amended are as follows:
L			
Delete each of the provision	s identified be	low from the certific	cate of formation.
Remove Thanh Liem Nguyen from	list of managir	ng members	

## Statement of Approval

The amendments to the certificate of formation have been approved in the manner required by the Texas Business Organizations Code and by the governing documents of the entity.

## Effectiveness of Filing (Select either A, B, or C.)

A.  This document becomes effective when	the document is filed by the secretary of state.			
B. This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is:				
passage of time. The 90 <sup>th</sup> day after the date of signing is:				
The following event or fact will cause the docu	ment to take effect in the manner described below:			
E	xecution			
	to the penalties imposed by law for the submission of a certifies under penalty of perjury that the undersigned is ng the entity to execute the filing instrument.			
Date: 1/4/2023				
Ву:				
	ساله (			
	Signature of authorized person			
	Debbi Tran			
	Printed or typed name of authorized person (see instructions)			