AMENDED

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000017528

FILED

02 OCT 21 PM 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

Titanium Mortgage & Financial Group, LLC

3750 US 27 North
2-C
Sebring, Fl. 33870
US

3750 US 27 North
2-C
Sebring, Fl. 33870

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
3750 US 27 North		3750 US 27 North	
Suite, Apt. #, etc.: 2C		Suite, Apt. #, etc.: 2C	
City & State: Sebring, Fl.		City & State: Sebring, Fl.	
Zip: 33870	Country: USA	Zip: 33870	Country: USA

4. FEI Number: 22-3835786 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

Name and Address of New Registered Agent

Jose Rodriguez
3750 US 27 North
2C
Sebring, Fl. 33870

7. Name and Address of Current Registered Agent

Name: Vincey Vasseli

Street Address (P.O. Box Number is Not Acceptable): 3750 US 27 North
2C

City: Sebring Fl. Zip Code: 33870

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Jose Rodriguez Jose Rodriguez 9-27-02

Signature, typed or printed name of registered agent and title if applicable. DATE

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9. MANAGING MEMBERS/MANAGERS

TITLE	MGR	TITLE	
NAME	Buchanan, Alvin S	NAME	
STREET ADDRESS	5107 Shad Drive	STREET ADDRESS	
CITY-ST-ZIP	Sebring, Fl. 33870	CITY-ST-ZIP	
TITLE	MGR.	TITLE	
NAME	Rodriguez, Jose A	NAME	
STREET ADDRESS	11908 Payne Rd	STREET ADDRESS	
CITY-ST-ZIP	Sebring, Fl. 33870	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E083B (12/01)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Jose Rodriguez Jose Rodriguez 9-27-02 (863)382-8094

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #