## W10000 22497

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M. THOMAS MAR 1 3 2009 **EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: CenterState Ho	me Loans, LLC (Name of Limited Liability C	ompany)		
The enclosed Articles of Amendment Please return all correspondence conc				
<u>Lori S</u>	. Pelinski (Name of P	erson)		09
Platinum Home Mortgage Corporation				
0000	(Firm/Con	pany)		SSECTION
2200 H	<del></del>	09 MAR 12 AM 10: 03 SECRETARY OF STATE SECRETARY OF LORIDA		
Rolling	Meadows, IL 60008 (City/State and	Zip Code)		
For further information concerning th	is matter, please call:			
Lori S. Pelinski (Name of Person)	at (_84	7 ) 797-9500 ext: (Area Code & Daytime Tele		
Enclosed is a check for the following	amount:			
	Filing Fee & \$\square\$\$\$\$\$\square\$	•	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is en	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CenterState Home Loans, LLC				
(Name of the Limited Liability Co	ompany as it now appears on our records.) ited Liability Company)	<del></del>		
(A Fiolida Dilli	ned Blabinty Company)			
The Articles of Organization for this Limited Liability Com	pany were filed on December 26, 2001	and assigned		
Florida document number L01000022497				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	ł liability company here:	99		
-		麗喜.		
The new name must be distinguishable and end with the words '	"Limited Liability Company," the designation "LLC	or the abbreviation		
"L.L.C."		SSEE E		
Enter new principal offices address, if applicable:		TOP		
(Principal office address MUST BE A STREET ADDRES	<u>(SS)</u>	95 8		
		Bu.		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registere	ed office address on our records, enter the	name of the new		
registered agent and/or the new registered office address	<u>s here</u> :			
Name of New Registered Agent:				
New Registered Office Address:				
(Enter Florida street address)				
	, Florida			
<del></del>		Zin 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 608, 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)

• • • If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Pinnacle Financial Corporation	Orlando, FL 32804	Add Remove
<u>MGR</u>	Douglas F. Long	2611 Technology Drive Orlando, FL 32804	Add Remove
MGRM	Platinum Home Mortgage Corp	P 2200 Hicks Road, Suite 101 Rolling Meadows, IL 60008	Adda Adda Adda Adda Adda Adda Adda Adda
			SATION OF THE STATE OF THE STAT
-			Add Remove
			Add Remove
D. If am	nending any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	•
	Article IV - Management shall be am	ended to state: The Limited Liability	<del></del>
	Company is to be amended to state:	The Limited Liability Company is to be	<del></del>
	managed by a manager or manager	s and the name(s) and addresses of such	<u></u>
	managers are: Platinum Home Mort	gage Corporation	
	2200 Hicks Road, Suite 101, Rolling	Meadows, IL 60008	
Dated M	arch 10 , 2009	·	
	Signature of a member	r or authorized representative of a member	
	Lori S. Pelinski ~ Au	uthorized Respresentative For printed name of signee	

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Filing Fee: \$25.00