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APR - 8 2009

J. BRYAN

APR 2 0 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corpora	ations		
SUBJECT:	Vexo MoHago (Name of Limbo	ed Liability Company)	·
The enclosed Articles of Ame	endment and fee(s) are subm	nitted for filing.	
Please return all corresponder	nce concerning this matter to	o the following:	
-	Rene	Fernandez (Name of Person)	
-	Nexo	MAGOGE (Firm/Company)	
_	128 U	Leston Road (Address)	
-	West	City/State and Zip Code)	
For further information conce	erning this matter, please cal	II:	
Rene Fo	erson)	at (<u>954 318 - 08</u> (Area Code & Daytime To	elephone Number)
Enclosed is a check for the fo	ollowing amount:		
5 125.00 Filing Fee	2\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 8, 2009

RENE FERNANDEZ NEXOMORTGAGE, LLC 128 WESTON ROAD WESTON, FL 33326

SUBJECT: NEXOMORTGAGE, LLC

Ref. Number: L04000054642

Returned 4/13/09

We have received your document for NEXOMORTGAGE, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is #P02000094184, NEXO GROUP, INC..

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Letter Number: 609A00011802

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nexomoitgage	111C	
(<u>Name of the Limited Liablifty Compan</u> (A Florida Limited L	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company of Florida document number <u>2013 98292</u> . L0400054642	• • • • • • • • • • • • • • • • • • • •	ned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi		
The new name must be distinguishable and end with the words "Limite	Nexo Marketips Grou	Up, L.L.
The new name must be distinguishable and end with the words "Limite L.L.C."	ed Liability Company," the designation "BUC" or the ab	oreviation
Enter new principal offices address, if applicable:	128 Weston Road	
Principal office address MUST BE A STREET ADDRESS)	Weston FL 33326	5
Enter new mailing address, if applicable:	1611 Somento Dr. Weston Fl 33326	
Mailing address MAY BE A POST OFFICE BOX)	Weston Fl 33326	
3. If amending the registered agent and/or registered office address here	ce address on our records, enter the name of	the new
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 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager of Managing Member being added or removed from our records:

MGR = Manager

MGRM = N	lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add
		· · · · · · · · · · · · · · · · · · ·	Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
<u>-</u>			
<u> </u>			<u> </u>
Dated			
	Signature of a member	or authorized representative of a member	
	Tyned	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00