# L05000021262

(Requ	uestor's Name)	
(Addr	ess)	
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(City/s	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nai	me)
(Docu	ıment Number)	)
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12 DEC -3 PH 1:54

DEC 4 2012)
T. HAMPTON

# **COVER LETTER**

Division of Corp	orations		
METROF	POLITAN MORTGAGE	E & BUSINESS INVESTME	NTS, LLC
SUBJECT:	Name of Limite	ed Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subr	mitted for filing.	
Please return all correspor	ndence concerning this matter t	to the following:	
	Ferris J. And	erson	
		Name of Person	
	METROPOLITAN MOR	RTGAGE & BUSINESS INVESTM	MENTS, LLC
		Firm/Company	**************************************
	7918 Chatea	nu Dr. S.	
		Address	
	Jacksonville,	, Fl. 32221	
		City/State and Zip Code	<del></del>
	fokal728@yahoo.	.COM  o be used for future annual report notificati	
To Called the material		·	on)
	oncerning this matter, please ca		
Ferris Ande	rson	<sub>at (</sub> 904 <sub>)</sub> 8644218	<u> </u>
Name of	Person	Area Code & Daytime Te	elephone Number
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	□\$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)

TO:

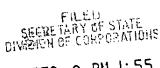
**Registration Section** 

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

METROPOLITAN MORTGAGE & BUSINESS INVESTMENTS. LLC



12 DEC -3 PM 1:55

# (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 03/03/2005 and assigned Florida document number L05000021262 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new

## New Registered Agent's Signature, if changing Registered Agent:

registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

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.

City

Enter Florida street address

Florida \_

Zip Code

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ALICIA FAITH KING	4430 Park Blvd N.	Add
		Pinellas Park Fl. 33781	Remove
MGR	EVERETT NEAL HOLLAND	1366 Fryston St	Add
		St Johns, FL 32259	Remove
<del></del> -			Add
			Remove
			Remove
			Remove STATE AT 15
<u></u>			Add
			Remove

a	ember 1	st 2012	<u>-</u>	
			authorized representati	va of a mambar
		-11-6	outhorised representati	ve of a member
	Signal	ture of a member or a	authorized representati	ve or a member

Page 3 of 3

Filing Fee: \$25.00

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