## 105000029380

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## **COVER LETTER**

<sup>1</sup>TO: Registration Section Division of Corporations

Pasco 32 Buildings, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

William Calderazzo

Name of Person

Pasco 32 Buildings, LLC

Firm/Company

104 E. Fowler Ave. Suite 201

Address

Tampa, FL 33612

City/State and Zip Code

bill@bctampa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William Calderazzo

813<sub>240-1269</sub>

Name of Person

Area Code & Daytime Telephone Numbe

Enclosed is a check for the 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)

**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

Pasco 32 Buildings, LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records ted Liability Company)	<u>-</u> )
The Articles of Organization for this Limited Liability Complete Florida document number <u>L05000029380</u> .	pany were filed on March 24, 2005	and assigned
rionda document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
MMFB Funding, LLC		
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Company," the designati	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>(S)</u>	<del>,</del>
		<u> Lig</u>
		3 00 100 100
Enter new mailing address, if applicable:	P.O. Box 272880	
(Mailing address MAY BE A POST OFFICE BOX)	Tampa, FL 33688-2880	in the
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		- 55 F
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ter the name of the ne
registered agent and/or the new registered office address	, note.	1,5 to 2
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t address
	, Florid	
	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 or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action** <u>Title</u> <u>Name</u> <u>Address</u> Add Remove Add Remove Add Remove 197. 197. Remove Remove Remove

. If amending any other information, ent	ter change(s) here: (Attach additional sheets, if necessary.)
•	
<sub>ited</sub> October 25	2013
Market	.,
Signature of	a member or authorized representative of a member
William Calderazzo	
<u>,,</u>	Typed or printed name of signee

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Filing Fee: \$25.00

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