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TALLAHASSEE, FLORIDA

14 DEC -3 PH 3: 19

LLC RAPROChange

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: TESORO HOME FUNDING LLC Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Char	ge and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter	to the following:		
JUAN G. JINENEZ Name of Person	<u> </u>		
TESOED HOME FUNDING, LLC Firm/Company			
4950 415T AVE N. Address			
ST. PETERSBURG & L 33709 City/State and Zip Code			
E-mail address: (to be used for future annual repo	rt notification)		
For further information concerning this matter, please call:			
Name of Person	727) 459-950 7 Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:			
□ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy		
INHS18 (2/14)			



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

14 DEC -3 PH 1: 30

November 18, 2014

JUAN G. JIMENEZ TESORO HOME FUNDING, LLC 4950 41ST AVE N ST. PETERSBURG, FL 33709 US

SUBJECT: TESORO HOME FUNDING, LLC

Ref. Number: L07000099805

We have received your document for TESORO HOME FUNDING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6050.

Tina D Carter Regulatory Specialist

Letter Number: 414A00024465

Division of Compositions, D.O. DOV 6997, Wallaharres, Florida 2021

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Florida.	
Name of the limited liability company: TESORE	2 HOME BUNDING LLC
2. (a) 4950 4/5/ Ave N.	(b) 4950 415 Ave N.
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
ST PETERS BURG, FL	ST. PETERSBURG, FL
33709	33709
5 17 2007	1 470 4440 00 7
Date of filing/registration in Florida	<u>L ρ 70 00099 80 5</u> 4. Document number
5. (a) JUAN 6, JIMENEZ	
Registered Agent and Registered Office shown on the records of th	te Florida Dept. of State:
220 1st Ave N.	
Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS)
	ALL:
TIERRA VERDE ,FL	337(5) BECARET
(b) RUSSELL L. ChEATHAN	-3 F
(b) Enter name of NEW Registered Agent and/or NEW Registered C	Office address:
10.	3: - STA
5546 FIRST AVE. /	√. 9
NEW Registered Office Address:	
ST. PETERSBURGFL	_337 <i>10</i> _
f the limited liability company is not organized under the laws	s of the State of Florida, it is hereby confirmed that after
the change or changes are made, the Florida street address of tagent will be identical. Or, in the case of a Florida limited liab	the registered office and the business office of the registered
was/were authorized by an affirmative vote of the members of the article of organization or the operating agreement of the li	the limited liability company or as otherwise provided in
the afficient of organization of the operating agreement of the in	
Signature of a member authorized representative of a member	Printed or typed name of signee
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p	e to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p he obligations of my position as registered agent as provided to merely reflect a change if the registered office address, I he notified in writing officially	för in Chapter 605, F.S. Or, if this document is being filed ereby confirm that the limited liability company has been
notified in writing official analysis	
Signature of Registered Agent	