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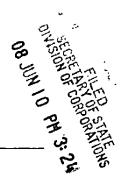
JUN 1 1 2008

EXAMINER

COVER LETTER

TO: Registration S . Division of Co			
SUBJECT: BELL	MORTGAGE, "LLC".		
•		nited Liability Company)	
The enclosed Articles of	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MADDY ANNE BELL		
	MARRY ANNE BELL	(Name of Person)	
	DELL MODTO A OF THE	0.11	0 V
	BELL MORTGAGE, "LLC". (Firm/Company)		
			ON JUN 10 PH 3: 24
	PO BOX 21704	(Address)	ORPC
		,	A RA
	SAN JOSE, CA 95151	(City/State and Zip Code)	
		(Chyrsiate and Zip Code)	
For further information	concerning this matter, please c	eall:	
MARRY ANNE BELL		at (408) 207-5656	
(Name of Person)		(Area Code & Daytime To	elephone Number)
Enclosed is a check for t	he following amount:		
2 \$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 Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



BELL MORTGAGE, "LLC".

(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	and assigned		
Florida document number 07000103271	·		
This amendment is submitted to amend the following	llowing:		
A. If amending name, enter the new name	of the limited lial	bility company here:	
THE SAME			
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if appli	cable:	NO	
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		THE SAME	
B. If amending the registered agent and registered agent and/or the new registered of	_	_	enter the name of the new
Name of New Registered Agent:	NO		
New Registered Office Address:	NO	,	
		(Enter Florida sti	reet address)
			ida
,		(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 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> Address **Type of Action** MARRY ANNE BELL MGR PO BOX 21704. SAN JOSE, CA 95121 **₽** 🗗 Add Remove NGUYEN, DUNG N PRES 5223 PARK BLVD N PINELLAS PARK FL 337 _ Remove r¶ Add Remove ☐ Remove ☐ Remove r Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00