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TO:

Registration Section Division of Corporations

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

SUBJECT.	NOBEL MORTGAC	GE FIELD SERVICES, LLC	
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	-	
		Linda M Smith, Esq.	
		Name of Person	
	LAW	OFFICES OF LINDA M SMITH	
		Firm/Company	
	12955	5 Biscayne Blvd., Suite 302	
Address Miami, FL 33181	Address		
		City/State and Zip Code	
	E-mail address: (smithlm@comcast.net to be used for future annual report notifi	cation)
For further information of	concerning this matter, please c	all:	
Linda M Smith, Esq.		305 899-1415	
Name o	of Person		Telephone Number
Enclosed is a check for t	he 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)
.			
. MAIL	ING ADDRESS:	STREET/COURIE	ER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NOBEL!	MORTGAGE FIELD SERVICES,	LLC		
(Name of the Limited I. (A F	iability Company as it now appears lorida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liabil Florida document number	ity Company were filed on	11/09/2007	and assigned	
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liability company her	<u>e</u> :		
N/A				
The new name must be distinguishable and contain the words	"Limited Liability Company," the des	ignation "LLC" or the ab		_
Enter new principal offices address, if applicable			NOISE.	-17
(Principal office address MUST BE A STREET A	DDRESS)		<u> </u>	
			္ ႏ	\
			26 PH	1 1 1
Enter new mailing address, if applicable:			2 5	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>		2 6	_
maining dudress MAT DE ATOST OFFICE BOZ	<u> </u>			_
B. If amending the registered agent and/or registered agent and/or the new registered office	0	our records, enter	the name of the	new
Name of New Registered Agent:				_
New Registered Office Address:				_
	Enter Floria	la 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 605, 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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	Kristen Naumko	10910 Ella Lee Lane	Add
		Houston TX 77042	Remove
			□ Change
MGRM	Kristen Naumko	10910 Ella Lee Lane	Add
		Houston TX 77042	Remove
			Change
			□ Add
			Remove
			□ Add □ □ Remove □ □ Remove □ □ E
			□ Change
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ective date, if other than the d	ate of filing:	mber 2016	(opti	onal)
effective date is listed, the date must be: If the date inserted in this block	k does not meet the ap	plicable statutory fi	r more than 90 days afte lling requirements, thi	r filing.) Pursuant to 605.0207 (s date will not be listed as tl
ument's effective date on the Dep	artment of State's reco	ords.		
record specifies a delayed on the second he 90th day after the recond		not an effectiv	e time, at 12:01	a.m. on the earlier of:
September ed	2016			
	ndes Na	160		

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Typed or printed name of signee

Filing Fee: \$25.00