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Office Use Only



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SECRETARY OF STATE
ALLAHASSEE, FINDER

## **COVER LETTER**

	on of Corporations	
SUBJECT:	Home Financing Network, LLC (Name of Limited Liability Company)	
The enclosed Art	articles of Amendment and fee(s) are submitted for filing.	
Please return all	I correspondence concerning this matter to the following:	
•	Brian N. Wheeler (Name of Person)	<del></del>
•	Home Financing Network, LLC	
	7900 Miami Lakes Drive W., # 201 \$	ZOOR APR 24 P
For further inform	rmation concerning this matter, please call:	FD 3: 51
	(Name of Person) (Area Code & Daytime Telephone Numb	per) ,
	neck for the following amount:	
\$25.00 Filing	Certificate of Status Certified Copy Certific (additional copy is enclosed) Certifie	iling Fee, tate of Status & ed Copy onal copy is enclosed)
por 1997 67 - 7	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  SECTION OF COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
The Control of the Co	Tantanassee, The 32301	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Home Financina (Name of the Limited I	Network L Jability Company as it now lorida Limited Liability Con	appears on our records.)	
— (A I	Florida Limited Liability Con	npany)	
The Articles of Organization for this Limited Lia	bility Company were filed	on Feb. 19, 2008	and assigned
Florida document number L \$6\$\$\$\$ 178	<u> 865</u> .		
•			
This amendment is submitted to amend the follow	ving:		
A. If amending name, <u>enter the new name of t</u>	he limited liability compa	iny here:	
NA NA			
The new name must be distinguishable and end with 'L.L.C."  B. If amending the registered agent and/or		APR AHA	<u>"T</u>
registered agent and/or the new registered offi		is on our recognes, enter	the name of the new
		P 3: 5: OF STATE E.FLORID,	m
Name of New Registered Agent:	NA	JE S	
New Registered Office Address:	NA		
		(Enter Florida street a	address)
	NA	, 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 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.

NA	
(If Changing Registered Agent, Signature of	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 **Address** Type of Action Title 1 Name 1 Francisco Gonzalez MGRM 8958 NW 171 Lane Hialeah, FL 33018 X Add Remove ☐ Add Remove Remove  $\square$ Add lRemove Remove ىب ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Office and Mailing Address Change to:

7900 Miami Lakes Drive W. #201

Miami Lakes, F 33016

Dated April 20 , 2008.

ba Letth

Signature of a member or authorized representative of a member

Brian Neil Wheeler
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00