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T. CLINE

APR 17 2009

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: BNB Mortgage UC (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:
Kurt Bierek (Name of Person)
BNB Mortgage LLC (Firm/Company)
Summit Executive Center 13575 S8th St. N. Suite 200
227
Clearway 1 5) +60 PS (City/State and Zip Code) For further information concerning this matter, please call:
(Name of Person) at (873) 453 - 3845 Fig. 38 (Area Code & Daytime Telephone Number) 674 Fig. 38 (Area Code & Daytime Te
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

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

DND Morig	fage UC
(<u>Name of the Limited Liability</u> C (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Complete Florida document number 60001077.	pany were filed on 11/19/2008 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	Sunnit Executive Conter
(Principal office address MUST BE A STREET ADDRES	13575 58+2 St Suite 200
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Summit Executions Center 13575 58th St 18 33760 Clearwader, FL 33760
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, enter the name of the new s here:
Name of New Registered Agent: New Registered Office Address: 13	Kurt Bievel umit Executive Center 575 58+12 57 N, Suite 200 (Enter Florida street address)
Cle	(City), Florida 33760 (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 Agen

Page 1 of 2

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:

<u> Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove ACCRE ACCRE
D. If amen	nding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessa	AH 10: 55
 Dated	t ·	1009	_, MGRM
	Kurt :	Page 2 of 2	

Filing Fee: \$25.00