## 108000110035

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	-
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
A. LUNT	
DEC 11 2008	

Office Use Only

**EXAMINER** 



600138497936

12/10/08--01011--022 \*\*60.00

2000 DEC 10 PM 4:51
SECRETARY OF STATE

## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT:	NATEUR MOUTS,	nge Fundang LCC ited Liability Company)			
	ζ- ι				
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	MIRHAEL	ALEXANDEL (Name of Person)			
		(Name of Person)			
	•				
		(Firm/Company)			
	4778 OAC	HARD LANE		2008 SEC	
		HARD LANE (Address)			
	DELRAY B	EACH FC 33YYJ (City/State and Zip Code)		TARY ASSEI	
		(City/State and Zip Code)		PA FE	] [ 
For further information	concerning this matter, please c	all:		2008 DEC 10 PM 4: 51 SECRETARY OF STATE TALLAHASSEE, FLORIDA	***************************************
MEHAGE.	ALEXANDEN	at ( <b>56</b> / ) 305 - 737 (Area Code & Daytime T	)/	<del></del>	
(Name	of Person)	(Area Code & Daytime T	elephone Number	•)	
Enclosed is a check for	the following amount:				
□ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	xd)

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

NATIONAL MORTERS	E FUNDING,	LLC	
(Name of the Limited Liability (A Florida L	Company as it now app	ears on our records.	ASE OF
(***15:144 2		,,	房 品 工
The Articles of Organization for this Limited Liability Co	ompany were filed on _	11/29/1999	rand assigned
Florida document number <u>LOBGO 110035</u>	<u>_</u> ·		DECGRED RANGE
			完きて
This amendment is submitted to amend the following:			PH 4:51
A. If amending name, enter the new name of the limit	ted lighility company l	lere.	5.Hi -
		<del></del>	
The new name must be distinguishable and end with the word	UNDING, LLC		···
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Con	npany," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:	817	E HALLBORD	BLUD.
(Principal office address MUST BE A STREET ADDR	ESS) / 57	FLOOR	BLUD.
	DECI	FIELD BEACH	FL 3344/
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	•		
	- · · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or registe	ered office address of	our records, enter	the name of the new
registered agent and/or the new registered office addr	<u>ess here</u> :	· <del></del>	
Name of New Registered Agent:			
Nove Benigtaned Office Address			
New Registered Office Address:		(Enter Florida street a	ddress)
	·		•
	(City)	, Florida _	(Zip Code)
	$(\cup ny)$		(Lip 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 amenting 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

	<u>Name</u>	Address	Type of Actio
			Add Remove
			Add Remove
			A REEDEC
		,	Add Lift STATE
			Remove
			Add Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessar	y.) 
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessar	y.)
	DECEMBER STA 2008	ge(s) here: (Attach additional sheets, if necessar	y.) 

Page 2 of 2

Filing Fee: \$25.00