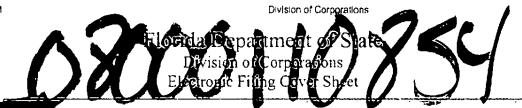
1/25/24, 3:46 PM



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(((H24000034955 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 : (305)444-4994 Phone Fax Number : (305)328-4774

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HOMEPEACE SOLUTIONS, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

Corporate Filing Menu

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To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HOMEPEACE SOLUTIONS, LLC			
(Name of the Limited Liabili (A Florida	ity Company as it now appears on our reco a Limited Liability Company)	<u>ı:ds.</u>)	
The Articles of Organization for this Limited Liability C Florida document number <u>L08000110854</u>	Company were filed on 12/03/2608	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
HOMEFIRST LENDING LLC			
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDI	RESS)		
		. Approximately the deletable metal material in the second	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>ent</u> c	er the name of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, 1	Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registere		20	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	complete performance of my duties, gent as provided for in Chapter 605 ed office address, I hereby confirm i	and I am familiar with and I, F.S. Or, if this Bocument is that the limited law ility	
	If Changing Registered Agent, Signature	e of New Registered Agent	

_ 🗆 Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M AMBR = A	lauager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□Add
			□Change
			⊡Add
			□ Change
			□Add
			Remove
			□ Change
			□Add
			□Remove
			□Add
			Remove
			□Remove