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(Re	equestor's Name)	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

T. CLINE

JUN 3 0 2009

EXAMINE

## **COVER LETTER**

TO: Registration So Division of Con					
SUBJECT:	Universal Ho	me Mortgage LLC.			
		ted Liability Company			
	Amendment and fee(s) are sub				
		Edwin Ramirez			
Name of Person		<del></del> -			
	Unive	rsal Home Mortgage LLC			
		Firm/Company			
	3	925 Peppervine Drive			
	<del></del>	Address			
		Orlando, FL 32828			
		City/State and Zip Code		20 FAI	
	E-mail address: (	h.bleznick@gmail.com to be used for future annual report notifications	ation)	2009 JUI SECRET	enitor 1
For further information	concerning this matter, please of	all:		V 29 TARY ASSE	-
_ Zac	chary Bleznick	at ( 407 ) 2	76-5332	[T]	Ę.
Name	of Person	Area Code & Daytime	Telephone Number	AMII: 05	E Section
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)	Certified C	of Status &	
M. W	INC ADDRESS.	STREET/COURIE	B ADDDECC.		

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

Univ	ersal Home Mortgage LL	C.	
· (A	Liability Company as it now appear Florida Limited Liability Company)	s on our records.	
The Articles of Organization for this Limited Li Florida document number		02/06/2009	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	f the limited liability company her	<u>'e</u> :	
The new name must be distinguishable and end wit "L.L.C."	th the words "Limited Liability Compa	any," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applic	able:		Taritating .
(Principal office address MUST BE A STREE	T ADDRESS)		UN 29 HASS
Enter new mailing address, if applicable:			9 AMIII:
(Mailing address MAY BE A POST OFFICE	ROY		705 105
(Mauing dadress MAT BE A FOST OFFICE	<u></u>	·	<del> </del>
B. If amending the registered agent and/registered agent and/or the new registered of	ffice address here:	our records, enter	the name of the new
Name of New Registered Agent:	Zachary Bleznick		<del></del>
New Registered Office Address:	3925 Peppervine Drive	Ti ti	11
		nter Florida street a	
	Orlando	, Florida _	32828
	City		Zip Code
No. 10 - 1-4- and A - 1-41 Ci-mature of characters	Degistered Agents		

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 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 Type of Action <u>Titlė</u> Name <u>Address</u> **Edwin Ramirez MGRM** 3807 Atrium Drive ☐ Add √ Remove Orlando, FL 32822 Zachary Bleznick MGRM 2615 Cheval Street Apt 108 ✓ Add Orlando, Fl. 32828 Remove ☐ Add ☐ Remove Add Remove Romove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009 Dated \_ Signature of a member or authorized representative of a member Edwin Ramirez/Zachary Bleznick Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00