

L090000 26030

(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:

Office Use Only



700182338367

06/21/10--01015--017 **25.00

FILED
10 JUN 21 AM 9:54
STATE
TALLAHASSEE, FLORIDA

S. HAWKES

JUN 22 2010

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FORECLOSURE LENDING GROUP, LLC
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:

PAOLA TAYLOR

Name of Person

Firm/Company

13560 SW 9 COURT

Address

DAVIE, FL 33325

City/State and Zip Code

creativerealty@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAOLA TAYLOR

Name of Person

at (**954**)

624 5854

Area Code & Daytime Telephone 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)

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

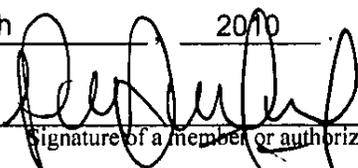
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MATIAS G. SEMISKY	2028 HARRISON STREET STE 201 OFFICE 5	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	PAOLA TAYLOR	13560 SW 9 COURT DAVIE, FL 33325	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

FILED
10 JUN 21 AM 9:54
CLERK OF COURT
DAVIE, FL

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated JUNE 15th, 2010


 Signature of a member or authorized representative of a member
PAOLA TAYLOR

 Typed or printed name of signee