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· (Re	equestor's Name)	
- (Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	ısiness Entity Nan	ne)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
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Office Use Only



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AUG 25 2016 S. YOUNG

COVER LETTER

	Registration Se Division of Co			
Share		ct Mortgage LLC		
SUBJEC	· I:	Name of Lin	nited Liability Company	
The anala	and Autolog of	Amondment and Code) on mul	mined Confiles	
		Amendment and fee(s) are sub ondence concerning this matter	-	
		Holly MacDonald-Korth		
			Name of Person	
		J W Korth & Company, L	P	-
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	あ
		2937 SW 27th Ave. Ste 30)7	AUG 24 AM 11: 14
	Address		2 ₂ %	
		Miami, FL 33133		
			City/State and Zip Code	
		hkorth@jwkorth.com		
			to be used for future annual report no	(ification)
For further	er information c	oncerning this matter, please c	all:	
Holly Ma	acDonald-Korth	l 	786 693-8652 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	ne following amount:		
\$25.0	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)
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 ussee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C	orations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

lity Company as it now appears on our recorda Limited Liability Company)	ords.)
Company were filed on 7/24/2009	and assigned
 ·	
nited liability company here:	
mited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
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	3 0 30
	<u></u>
	1277
stered office address on our reco dress here:	rds, <u>enter the name of the new</u>
Enter Florida street ada	tress
	Florida
City	Zip Code
	nited Liability Company here: nited Liability Company." the designation "L RESS) stered office address on our recolress here: Enter Florida street add

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u> Mb-R	Name Holly Mac Donald-Koth	Address 2937 SW27th Ave, St. 3	Type of Action
		2937 SW27th Ave, Ste 3 MIAMI, FZ 33133	□ Remove
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) Ine Dated	90th day after the record is filed			
	ord specifies a delayed effective		ective time, at 12:01 a.m. or	the earlier of
Note:	If the date inserted in this block does not ent's effective date on the Department of	meet the applicable statut	ory filing requirements, this date wi	ll not be listed as
(If an eff	ve date, if other than the date of filir ective date is listed, the date must be specific ar	nd cannot be prior to date of f	(optional) iling or more than 90 days after filing.) P	= ursuant to 605.0207
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00