

**LD9000105316**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

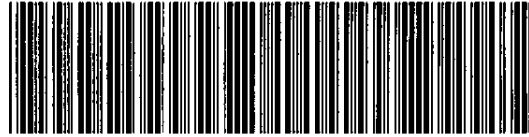
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2010 NOV 24 AM 10:19  
TALLAHASSEE, FLORIDA

**C. LEWIS**  
NOV 29 2010  
**EXAMINER**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FLORIDA FORECLOSURE MANAGEMENT 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:

HUMBERTO GONZALEZ CORREA

Name of Person

FLORIDA FORECLOSURE MANAGEMENT LLC

Firm/Company

6304 POWERLINE ROAD

Address

FORT LAUDERDALE, FL 33309

City/State and Zip Code

olsak@bellsouth.net

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

For further information concerning this matter, please call:

HUMBERTO GONZALEZ CORREA

Name of Person

at ( 305 )

244-9169

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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2010 NOV 24 AM 10:19

FLORIDA FORECLOSURE MANAGEMENT LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on NOVEMBER 02, 2009 and assigned Florida document number L09000105316.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:  
(Principal office address **MUST BE A STREET ADDRESS**)

6304 POWERLINE ROAD  
FORT LAUDERDALE, FL 33309

Enter new mailing address, if applicable:  
(Mailing address **MAY BE A POST OFFICE BOX**)

6304 POWERLINE ROAD  
FORT LAUDERDALE, FL 33309

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: HUMBERTO GONZALEZ CORREA  
New Registered Office Address: 6304 POWERLINE ROAD  
*Enter Florida street address*  
FORT LAUDERDALE, Florida 33309  
*City Zip 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.*

HUMBERTO GONZALEZ CORREA  
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	<u>HUMBERTO GONZALEZ C</u>	<u>6304 POWERLINE ROAD</u>	<input checked="" type="checkbox"/> Add
		<u>EORT LAUDERDALE, FL 33309</u>	<input type="checkbox"/> Remove
MGRM	<u>MILENKA VIETRO</u>	<u>9858 GLADES ROAD</u>	<input type="checkbox"/> Add
		<u>APT # 184</u>	<input checked="" type="checkbox"/> Remove
		<u>BOCA RATON, FL 33434</u>	
			<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

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

Dated NOVEMBER 19, 2010

HUMBERTO GONZALEZ CORREA  
Signature of a member or authorized representative of a member

HUMBERTO GONZALEZ CORREA

Typed or printed name of signee

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