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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(
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B. KOHR

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EXAMINER

TO JUN 30 AN ID: 25

COVER LETTER

TO: Registration S Division of Co			•	
	J.I. Kisla	k Mortgage LLC	·	
SUBJECT:		ted Liability Company	6	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	10 JUH 30 M	
Please return all corresp	ondence concerning this matter	to the following:	3	
		Christy Complo Name of Person		
		Name of Person		
		J.I. Kislak, Inc.		
		Firm/Company		
7900 Miami Lakes Drive West				
		Address		
	M	liami Lakes, FL 33016		
		City/State and Zip Code	- 	
		complo@kislak.com		
For further information	E-mail address: (concerning this matter, please of	to be used for future annual report no call:	tification)	
Cł	nristy Complo	at (_305)	364-4101	
Name of Person		Area Code & Dayt	364-4101 ime 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 enclos	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: Registration Section Division of Corporations		Registration Sec Division of Corp	orations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited</u> (A	I. Kislak Mortgage LLC 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		05/07/2010	and assigned
This amendment is submitted to amend the folio. A. If amending name, enter the new name of	-	<u>e</u> :	
The new name must be distinguishable and end with "L.L.C."	h the words "Limited Liability Compa	ny," the designation "LLC"	or the abbreviation
Enter new principal offices address, if applica	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE I	BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered of	•	ur records, <u>enter the</u>	name of the new
Name of New Registered Agent:			
New Registered Office Address:	Ent	er Florida street address	
		, Florida	
	Citv	2	lip 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.

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>Title</u> <u>Name</u> **Address** MGRM J.I. Kislak, Inc. 7900 Miami Lakes Drive West Add 🕜 Remove Miami Lakes, FL 33016 JIK Mortgage Manager LLC 7900 Miami Lakes Drive West ✓ Add Remove Miami Lakes, FL 33016 □ Add ☐ Remove □ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) June 28 2010 Dated_ Signature of a member or authorized representative of a member Thomas Bartelmo Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00