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(Requestor's Name)							
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(Audiess)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Basilloss Ellas) Hallis)							
(Document Number)							
Certified Copies Certificates of Status							
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10 NOV 12 AM 11: 30

DIVISION OF CORFORATION

COVER LETTER

SUBJECT:		Financial Group "L.	L.C.,"				
	Name of Limit	ted Liability Company					
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.					
Please return all corresp	ondence concerning this matter	to the following:					
		Richard D. Palmer					
	"L.L.C.,"						
		Address					
	Boynton Beach,FL 33472 City/State and Zip Code						
	NMFG1ST@SBCGLOBAL.NET						
	E-mail address: (to be used for future annual report notification)						
For further information	concerning this matter, please concerning	all:					
Dia	hard D. Palmer	564	732-0295				
	of Person	at (561)	aytime Telephone Number				
Name	ot reison	Alea Coue & Da	synthe relephone Number				
Enclosed is a check for	the following amount:						
\$25.00 Filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Filing Fee,				
[4] \$25.00 Fining Fee	Certificate of Status	Certified Copy (additional copy is enc	Certificate of Status &	d)			

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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**



10 NOV 12 AM 11: 30

National Mo	rtgage Fin	ancial Group"l	<u>L.L.C.," </u>				
(Name of the Limited L (A F	iability Compa Iorida Limited L	<u>ny as it now appears</u> Jiability Company)	on our records.)				
(-1		, ,	*				
The Articles of Organization for this Limited Lial	oility Company	were filed on	06/04/2010	and assigned			
Florida document numberL100000605	i56						
This amendment is submitted to amend the follow	ving:						
This differentiation is submitted to different the follow	6.						
A. If amending name, enter the new name of t	he limited liab	<u>ility company here</u>	:				
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Compan	y," the designation "I	LC" or the abbreviation			
Enter new principal offices address, if applicat	8862 Indian River Run						
Principal office address MUST BE A STREET ADDRESS)		8862 Indian River Run					
	Boynton Beach,FL. 3						
							
Enter new mailing address, if applicable:							
	av)						
Mailing address MAY BE A POST OFFICE B	<u>UX)</u>						
				* 1,			
D		~		ha nama of the no			
B. If amending the registered agent and/or registered agent and/or the new registered office			ir recoras, <u>enter t</u>	ne name of the ne			
		- '					
Name of New Registered Agent:	Richard D. Palmer						
Name of New Registered Agenc.							
New Registered Office Address:	w Registered Office Address: 8862 Indian River Run Enter Florida street address						
		Ente	er Florida street add	ress			
	Bo	ynton Beach	, Florida	33472			
		City		Zip Code			
New Registered Agent's Signature, if changing Re	gistered 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member

<u>Title</u> Name **Address Type of Action MGRM** Chris Barba 11191 13th Ave Hanford,ca.93230 ☐ Add ✓ Remove ☐ Add ☐ Remove ☐ Add ☐ Remove _ Add Remove ∏Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Richard D. Palmer Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00