

L100000063586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

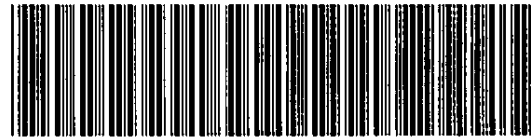
Special Instructions to Filing Officer:

A. LUNT

OCT 19 2010

EXAMINER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 OCT 18 PM 4:22

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PREO Mortgage, 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:

James E. Albertelli

Name of Person

Albertelli Law

Firm/Company

5404 Cypress Drive, Suite 300

Address

Tampa, FL 33609

City/State and Zip Code

jalbertelli@albertellilaw.com

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 OCT 18 PM 12:22

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For further information concerning this matter, please call:

James E. Albertelli

Name of Person

at (**813**) **221-4743**

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

PREO Mortgage, LLC

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2010 OCT 18 PM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>
<u>CEO</u>	<u>James E. Albertelli</u>	<u>600 N Westshore Blvd. Suite 410</u> <u>Tampa, FL 33609</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>P</u>	<u>William Grand</u>	<u>600 N Westshore Blvd. Suite 410</u> <u>Tampa, FL 33609</u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u>COO</u>	<u>Carl Elliott</u>	<u>600 N Westshore Blvd. Suite 410</u> <u>Tampa, FL 33609</u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u>CRO</u>	<u>Nathan Rouse</u>	<u>600 N Westshore Blvd. Suite 410</u> <u>Tampa, FL 33609</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>CFO</u>	<u>George J. Albertelli</u>	<u>600 N Westshore Blvd. Suite 410</u> <u>Tampa, FL 33609</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VP</u>	<u>Jonathan D. Sawyer</u>	<u>600 N Westshore Blvd. Suite 410</u> <u>Tampa, FL 33609</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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 TALLAHASSEE, FLORIDA

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

Dated

September 1st, 2010

Signature of a member or authorized representative of a member

James E. Albertelli

Typed or printed name of signee