## L100000063586

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
A. LUNT					
OCT <b>1 9</b> 2010					
EXAMINER					

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2010 OCT 18 PM 14 22 SECRETARY OF STATE TALLAHASSEE, FLORIGH

## **COVER LETTER**

то:	Registration Se Division of Cor		•			<b>*</b> .	
			Mortgage, LLC				
		Amendment and fee(s) are sub					
Please	e return all correspo	ondence concerning this matter	to the following:				
			James E. Albertelli		_		
			Name of Person				
Albertelli Law					_		
Firm/Company							
5404 Cypress Drive, Suite 300					₹SS	22	
Address					- Lag	8	E
Tampa, FL 33609			ASSI ASSI	2010 OCT 18	-		
City/State and Zip Code  jalbertelli@albertellilaw.com  E-mail address: (to be used for future annual report notification)				<b>3</b>	F. 18		
		jalbe	ertelli@albertellilaw.com		STAT	2	
For fu	orther information of	concerning this matter, please of	-		<del>S</del> A	129	
				204 4740			
		es E. Albertelli	at ( 813 ) Area Code & Daytime	221-4743 Telephone Number	er		
			,,,	<u>.</u>			
Enclo	sed is a check for the	he following amount:					
<b>\$</b> 2	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Sta	atus &	osed)
	Registr	ING ADDRESS: ration Section	STREET/COURING Registration Section	1			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRE	O Mortgage, LLC			
( <u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears a Limited Liability Company)	on our records.		
The Articles of Organization for this Limited Liability	Company were filed on	6/14/2010	and assigned	
Florida document number L10000063586	·			
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the line	mited liability company here	: :	ZIII OCT 18 P	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Compan	y," the designation	TLC" or the abbrev	ion
Enter new principal offices address, if applicable:			- 12 · 12	
(Principal office address MUST BE A STREET ADD	ORESS)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office ad		ur records, <u>enter</u>	the name of the	<u>new</u>
Name of New Registered Agent:				
New Registered Office Address:				
	er Florida street ac	ldress		
		, Florida _		
	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.

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** Address Title <u>Name</u> CEO James E. Albertelli ✓ Add 600 N Westshore Blvd. Suite 410 Tampa, FL 33609 Remove William Grand Ρ 600 N Westshore Blvd. Suite 410 Tampa FL 33609 COO Carl Elliott 600 N Westshore Blvd. Suite 410 Tampa, FL 33609 15 Nathan Rouse CRO Add 600 N Westshore Blvd. Suite 410 Remove Tampa, FL 33609 CFO George J. Albertelli ✓Add 600 N Westshore Blvd. Suite 410. Remove Tampa, FL 33609 **VP** Jonathan D. Sawyer 600 N Westshore Blvd. Suite 410 Iampa FL 33609 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member James E. Albertelli Typed or printed name of signee

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Filing Fee: \$25.00