# L10000132155

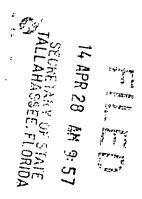
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## MG LAND MANAGEMENT, LLC

1553 SE FORT KING STREET ◆ OCALA, FL 34471 OFFICE (352) 401-3755 ◆ MOBILE (352) 362-5226 ◆ FAX (352) 401-3757 NGARCIA@MCBRIDELAND.COM

April 24th, 2014

Florida Department of State Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Name Change for MG Land Management One, LLC (FL Document # L10000132155)

To Whom It May Concern:

Please find attached an amendment to the corporate files of MG Land Management One, LLC (FL Document # L10000132155) to change the name from MG Land Management One, LLC to MG Mortgages, LLC. There are no other changes needed at this time. If you have any questions or any additional information is needed, please don't hesitate to contact me at either number listed above.

Singerely.

Nathan Varcia, Member

MC Land Management One, LLC

#### **COVER LETTER**

TO: Registration Division of C			
SUBJECT:	MG LAND Name of Limite	ANAGEMENT ONE, Led Liability Company	<u>IC</u>
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
	NATI	Name of Person	
		LAND MANAGEMENT Firm/Company	
	(55	3 SE FORT KINGS	, <u>7</u> ,
		ALA, FL 34471 City/State and Zip Code	
		City/State and Zip Code  14 @ MCBRIDE LAND - LOM  5 be used for future annual report notificati	
For further informatio	n concerning this matter, please ca		001,
Nam	CARCIA ne of Person	at (352) 362 - S Area Code & Daytime Te	5226 elephone Number
Enclosed is a check for	or 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

MG LAND	, MANAGEMENT O	NE, LLC
( <u>Name of the Limited Lial</u> (A Floi	pility Company as it now appears rida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability		EMBER 29, 2010 and assigned
Florida document number <u>L10000132155</u>	<u> </u>	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here	:
MG MORTO	fages LLC	
The new name must be distinguishable and end with the "L.L.C."		y," the designation, "LLC" or the abbreviation
Enter new principal offices address, if applicable	<u></u>	
(Principal office address MUST BE A STREET A	DDRESS)	75 % ALVAN
		ζό⊼ œ t <sup>elle</sup>
Enter new mailing address, if applicable:		OR OR
(Mailing address MAY BE A POST OFFICE BOX	<u></u>	FE DA
B. If amending the registered agent and/or registered agent and/or the new registered office		ir records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Ente	r Florida street address
_		, 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 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>	<u>Name</u>	Address	Type of Action	
			Add	
			Remove	
			Remove	
			— —	
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		<del></del>		
			Remove	
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			Remove	
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			Remove	
			<del></del>	

D.	If ame	nding any	y other info	ormation, enter change(s) here: (Attach additional sheets, if necessary.)
	-			
	_			
	_			<del></del>
Dat	ed	APPIL	17th	, <u>2014</u> . 1
		<del></del>		Signature of a member or authorized representative of a member
				NATUM IZ. (TARCIA

Page 3 of 3

Filing Fee: \$25.00

14 APR 28 AM 9: 57
SECRETARY OF STATE
TAIL LAHASSEE, ELORIO