LII 000021156

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COVER LETTER

TO: Registration Section Division of Corporations

Investment Mortgage Consultants, LLC

SUBJECT: _

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:

Maria L Ortega

Name of Person

Investment Mortgage Consultants, LLC

Firm/Company

1150 NW 72 Avenue, Suite 502

Address

Miami, FL 33126

City/State and Zip Code

maria.ortega@411imc.com

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

For further information concerning this matter, please call:

305 804-4085 María L Ortega at (____ Daytime Telephone Number Name of Person Area Code Enclosed is a check for the following amount: ■ \$25.00 Filing Fee 🗹 \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT ΤO ARTICLES OF ORGANIZATION OF

Investment Mortgage Consultants.	LLC				
(Name of the Limit	ted Liability Comp: (A Florida Limited	iny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited L Florida document number L11000021156	iability Company	were filed on February 16th, 2011 and assigned			
This amendment is submitted to amend the foll	owing:				
A. If amending name, <u>enter the new name o</u>	<u>f the limited liab</u>	<u>ility company here</u> :			
The new name must be distinguishable and contain the w	vords "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L L.C."			
Enter new principal offices address, if applicable: (<u>Principal office address MUST BE A STREET ADDRESS)</u>		1150 NW 72 AVENUE, SUITE 502			
		MIAMI, FLORIDA 33126			
Enter new mailing address, if applicable:		1150 NW 72 AVENUE, SUITE 502	_		
(Mailing address MAY BE A POST OFFICE BOX)		MIAMI, FLORIDA 33126			
B. If amending the registered agent and/or r agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:		address on our records. <u>enter the name of the new regis</u>			
	N/A	Enter Florida street address	,		

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 605, 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.

City

_. Florida ____

Colo

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	<u>Address</u>	Type of Action
N/A			🖸 Add
			[] Change
		,,	🗆 Add
			🖸 Remove
			□Change
			🗆 Add
			🗆 Remove
			□ Change
			🗆 Add
		<u>_,</u>	
			🗆 Add
			🗆 Add
			Change

JUST CHANGING BUSINESS ADDRESS A	AND MAIL	ING ADDRI	ESS	
FROM \$181 NW 36 STREET, SUITE 15				
DORAL, FL 33166				
TO:				
1150 NW 72 AVENUE, SUITE 502				
MIAMI, FL 33126				
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

JULY 19TH.	2021	
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	gnature of a member or authors ed representative	e of a member
MAR	+ + Orfeg	4.
	Typed or printed name of signee	

Filing Fee: \$25.00