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EXAMINER



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07/05/11--01004--017 **25.00

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COVER LETTER

TO:	Registration S Division of Co		}	·
SUBJE	ECT:	St. James Mortgage	Acquisition Company, LLC	
30 B31			nited Liability Company	
			•	
The en	closed Articles of	f Amendment and fee(s) are su	bmitted for filing.	
Please	return all corresp	ondence concerning this matte	er to the following:	
			Name of Person	
	St. James Mortgage Acquisition Company, LLC			
			Firm/Company	
500 Australian Ave So #1) Australian Ave So #120		
	Address			
		We	st Palm Beach FL 33401	
			City/State and Zip Code	
		sa	lly@rhodesholdings.net (to be used for future annual report notification)	<u> </u>
For fur	ther information	concerning this matter, please	·	
	c	Sally Largen	at (561) 659-5400	
		Sally Larson of Person	at (561) 659-5400 Area Code & Daytime Telephone Nu	umber
Enclose	ed is a check for t	the following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	0 Filing Fee, ifficate of Status & iffied Copy litional copy is enclosed)
	Regist Divisi P.O. B	ANG ADDRESS: ration Section on of Corporations dox 6327 assee, FL 32314	STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	SS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

St. James Mortgage Ac	quistion Com	pany, LLC		_	
(Name of the Limited Liability Compa (A Florida Limited	Liability Company)	rs on our records.			
The Articles of Organization for this Limited Liability Company	were filed on	6/29/2011	and	l assig	gned
Florida document number L11000075449					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lial	oility company her	<u>·e</u> :			
St. James Mortgage Acq	uisition Compar	ny, LLC			
The new name must be distinguishable and end with the words "Lim" L.L.C."	ited Liability Compa	any," the designation	"LLC" or 1	the ab	breviation
Enter new principal offices address, if applicable:		••			
(Principal office address MUST BE A STREET ADDRESS)	-		- 53	;	
			- 52-	=	
			7>	7	to the section of
Enter new mailing address, if applicable:				ن	Transla.
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	PK	
			يستر آ	$\dot{\dot{\omega}}$	e and a
				20	
B. If amending the registered agent and/or registered o		our records, <u>enter</u>	the nam	1e of	the new
registered agent and/or the new registered office address her	<u>re</u> :				
Name of New Registered Agent:					
New Registered Office Address:					
	En	ter Florida street ad	ddress		
		, Florida _			
	City		Zip C	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

Page 1 of 2

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 = N	MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
	- <u></u>		Add Remove		
			Add Remove		
 -			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
D. If ameno	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)			
. 			<u> </u>		
_			-		
 Dated		· _/			
	Cionatura of a manufactura	r or authorized representative of a member	···		
	-	Paul Rhodes			
	Typed	or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00