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TALLAHASSEE, FLORIDA

B. BOSTICK
DEC 11 2012
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CONSUMER MORTGAGE NETWORK, 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:

KURT BIEREK

Name of Person

CONSUMER MORTGAGE NETWORK, LLC

Firm/Company

611 S FORT HARRISON AVE #383

Address

CLEARWATER, FL 33756

City/State and Zip Code

KBIEREK@GMAIL.COM

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

For further information concerning this matter, please call:

KURT BIEREK

Name of Person

at **813 453-3845**

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

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CONSUMER MORTGAGE NETWORK, LLC

Page 1 of 3

MGR = Manager
MGRM = Managing Member

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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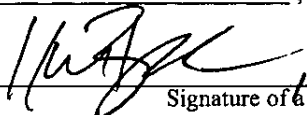
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated DECEMBER 4TH, 2012

 MGRM

Signature of a member or authorized representative of a member

KURT BIEREK, MGRM

Typed or printed name of signee

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Filing Fee: \$25.00

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SECRETARY OF THE
PALM BEACH COUNTY
FLORIDA