## L12000114346

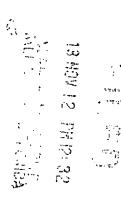
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## **COVER LETTER**

NEAT MORTGAGE, LLC  SUBJECT:  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.			
Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.			
The enclosed Articles of Amendment and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Yosef Y Kanner			
Name of Person			
Firm/Company			
PO Box 820			
Address			
Hallandale FL 33008			
City/State and Zip Code y@floridastatetrust.com		13 804	, :
E-mail address: (to be used for future annual report notification)	· 47	2	4°-x
For further information concerning this matter, please call:		N	• •
Yosef Kanner 717 467-1680 ::			
Name of Person Area Code & Daytime Telephone Number		ত ও	+
Enclosed is a check for the following amount:			
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$\$ Certificate of Status \$\times \text{Certified Copy} \text{(additional copy is enclosed)}\$\$ Certified Cogy \text{(additional copy is enclosed)}\$\$ Certified Cogy \text{(additional copy is enclosed)}\$\$ \$\text{Certified Cogy}\$\$ \$Certifie	of Stat Copy		losed)

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

Name of New Registered Agent:  New Registered Office Address:	6015 Wash	ington Street, Su Enter	r Florida street addr	ess 023
	6015 Wash		_ <del></del>	
Name of New Registered Agent:				
egistered agent and/or the new registered of	<u>lice address her</u>	<u>'e</u> :	<u></u>	
. If amending the registered agent and/o	or registered of	fice address on ou	r records, enter th	<u>ie nâme of the l</u>
			177. 3 2	7
<u>Mailing address MAY BE A POST OFFICE I</u>	<u>BOX)</u>		·	<i>6</i> 0 * 1
nter new mailing address, if applicable:			· · · · · · · · · · · · · · · · · · ·	
			F-12	, <b>3</b>
			TIGA USUZS	,
<u> Principal office address MUST BE A STREE </u>	T ADDRESS)		rida 33023	
nter new principal offices address, if applica		Suite 200		
L.L.C."		6015 Washingt	ton Street	
he new name must be distinguishable and end with	n the words "Limi	ted Liability Company	," the designation "LI	C" or the abbrevia
. If amending name, enter the new name or	the militaria	<u> </u>		
. If amending name, enter the new name of	the limited liah	ility comnany here:		
his amendment is submitted to amend the follo	wing:			
orida document number	<del></del>			
L12000114346 lorida document number	ability Company	were med on		and assigned
he Articles of Organization for this Limited Lia	shility Compony	09/06	6/2012	and assigned
( <u>Name of the Limited</u> (A	Florida Limited L	iability Company)	Jii Gal iccords.	

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	DYC Group LLC	PO BOX \$20	Add
		Hallandale FL 33008	Remove
			Remove
			Add  Remove
			33
<del></del>		2	Add
			Remove
			Add
			Remove
		·	—
			Add
			Remove

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	Warmer Signature of a member or authorized representative of a member
	gravine

Page 3 of 3

Filing Fee: \$25.00