

L13000135609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

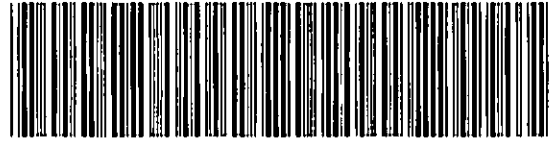
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400322075794

FILED
2018 DEC 18 AM 8:17
CLERK OF STATE
TALLAHASSEE, FL

12/18/18--01011--013 ••29.00

AR 50
GRAPH

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Satori Financial Mortgage Group, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Ortega

Name of Person

Satori Financial Mortgage Group, LLC

Firm/Company

2808 W Broadway Ave

Address

Minneapolis, MN 55411

City/State and Zip Code

dortega@satorimortgage.com

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

For further information concerning this matter, please call:

David Ortega at (952) 544-1706
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company
submits the following statement in order to change its registered office or registered agent, or both, in the State of
Florida.

1. Name of the limited liability company: Satori Financial Mortgage Group, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
111 N ORANGE AVE SUITE 800
ORLANDO, FL 32801

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
7841 WAYZATA BLVD SUITE 207
MINNEAPOLIS, MN 55426

10/04/2013

L13000135609

3. Date of filing/registration in Florida 4. Document number

5. (a) William Allen Jackson

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
4205 VAN BUREN ST.
HOLLYWOOD, FL 33021

(b) Daniel Otterbacher

Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

111 N ORANGE AVE SUITE 800

ORLANDO, FL 32801

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

David Ortega

Printed or typed name of signer

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.

[Signature]
Signature of Registered Agent

FILED
2018 DEC 18 AM 8:17
TALLAHASSEE, FL
DIVISION OF STATE