L140000028354

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UL OS 2014 J. HARRIS

COVER LETTER

Registration Section

TO:

Division	of Corp	orations		
_				
SUBJECT: Equ	uitable Lo	oan Services LLC	ited Liability Company	
		Nane of thin	ned Diability Company	
The enclosed Arti	icles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all c	arresnone	dence concerning this matter	to the following:	
i rease retain an e	correspon	series concorning and matter	to the following.	
		Kaley Marie Lopez		
			Name of Person	
		Equitable Loan Services	шс	
		Equitable Loan Services	Firm/Company	 -
	•			
		255 Primera Blvd. Suite	160	
			Address	
		Lake Mary, Florida 3274	6 City/State and Zip Code	
		EquitableLoanServices@ E-mail address: (t	gmail.com o be used for future annual report	notification)
Con flowbon in form	• :		•	,
rot futuer miorit	nation con	cerning this matter, please ca	III:	
Benny Garcia			/ 407 > 700.00	40
	Name of P	erson	at (<u>407</u>) <u>796-804</u> Area Code Da	ytime Telephone Number
Enclosed is a chec	ck for the	following amount:		
□ \$25.00 Filing	, Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee &	□ \$60.00 Filing Fee.
		Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
			,	(additional copy is enclosed)
	•			
		G ADDRESS:		URIER ADDRESS:
		on Section of Corporations	Registration Se Division of Co	
	P.O. Box	6327	Clifton Buildin	មិ
	Tallahass	ee, FL 32314	2661 Executive	e Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Equitable Loan Services LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lir	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on 02/18/2014	and assigned
Florida document number L14000028354		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and end with the words "Limite	d Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>(S)</u>	
		- 00
		ISIO 10 ISI
Enter new mailing address, if applicable:	255 Primera Blvd.	
(Mailing address MAY BE A POST OFFICE BOX)	Suite 160	ত টুমূন টুমূন
	Lake Mary, FL 32746	그 생유대
		2: 验
B. If amending the registered agent and/or registered	ed office address on our records, <u>e</u>	nter the name of the n
registered agent and/or the new registered office address	s here:	•
,		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	City	Zip 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 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Kaley Marie Lopez	132 Kaywood Circle, Sanford, FL 32771	
			■ Remove
MGR	Benny Garcia	255 Primera Blvd. Suite 160	E I Add
		Lake Mary, FL 32746	Remove
			□ Add
			🗆 Remove
			SECRETA DIVISIONO
			-9 Bell 2: 58
			2 55°° □ Add
			□ Remove
			Add
·			Remove

	e: (Attach additional sheets, if necessary.)
effective date, if other than the date of filing: effective date must be specific, cannot be prior to date of receipt or fit date this document is filed by the Florida Department of State)	(optional) led date and cannot be more than 90 days after
date this document is filed by the Florida Department of State)	
date this document is filed by the Florida Department of State)	
e date this document is filed by the Florida Department of State)	
ted July 7 . 2014	
2	

Page 3 of 3

Filing Fee: \$25.00