# 11400030761

(Re	equestor's Name)	
(Ad	ldress)	
(Ar	Idress)	
V		
	=•··	
(Ci	ty/State/Zip/Phone	e #)
☐ PICK-UP	WAIT	MAIL
	ısiness Entity Nan	ne)
(3.		,
(Do	ocument Number)	٠
Certified Copies	_ Certificates	of Status
		1
Special Instructions to	Filing Officer:	
		ì
		Į
}		

Office Use Only



900301363959

07/19/17--01012--023 \*\*25.00

2017 JUL 19 PH 3: 25

K. SALY JUL 2 1 2017

# **COVER LETTER**

MAINSAI SUBJECT:	L CAPITAL MORTGAGE LL	C	
SUBJECT.	Name of Lin	nited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	JB ROTH		
	<del> </del>	Name of Person	
	ROTH LAW FIRM PL		
		Firm/Company	<del></del>
	6100 GREENLAND RD.	SUITE 604	
	<u> </u>	Address	
	JACKSONVILLE, FL 322	258	
		City/State and Zip Code	
	JB@ROTHLAWFIRM.NE		
		to be used for future annual report notifi	cation)
For further information (	concerning this matter, please co	all:	
JB ROTH		904 595-7900 at ( )	
Name o	of Person		Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fcc & 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

TO:

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

ŕ	LED
-0/	/^
SECRETA:	PM 3:25  RY OF STATE  EE, FLORID:
735	EE, FLORIDA

MAINSAIL CAPITAL MORTGAGE LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	(A riorida Limited Liability Company)	124/2014
The Articles of Organization for this Limited L Florida document number <u>L14000030764</u>	iability Company were filed on 02	/24/2014 and assigned
This amendment is submitted to amend the fol	owing:	
A. If amending name, enter the new name of	of the limited liability company ho	<u>ere</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the d	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applied	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	
B. If amending the registered agent and registered agent and/or the new registered of		our records, enter the name of the new
Name of New Registered Agent:	ROTH LAW FIRM PL	
New Registered Office Address:	6100 GREENLAND RD., SUITE	······································
		rida street address
	JACKSONVILLE City	Florida 32258 Zip Code
	( IIÿ	г.р с оне

### 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DISSTON, GEOFF	822 N. HIGHWAY ATA	
		SUITE 204	■ Remove
		PONTE VEDRA BCH, FL 32082	□ Change
MGR	HILLIARD, EDWARD	822 N. HIGHWAY ATA	Add
	-	SUITE 204	□ Remove
		PONTE VEDRA BCH, FL 32082	Change
			Add
			Remove
			L 19d PM 3m25 HASSEE, FLORID
			E Change
			□ Add
		<u>.                                    </u>	□ Remove
			Change
			Remove
			Change

		<del>.</del>				<u></u>	_
<del>-</del>		<del></del>					_
			<del>,</del>				_
							_
	<del></del>				<del></del>		-77
		<del></del>					- F
						55. K. O.	-3
					<del></del>	525	3. 25 St. 1
			<del>-</del>			=======================================	- -
							_
			<del>.</del>		··		<del>_</del>
				<u>.                                    </u>		<del></del>	_
							<del>_</del>
		<u> </u>		<del></del> -	<u>-</u>		<del></del>
Effective da	te, if other thar	the date of filin	ıø:		(0]	otional)	
If an effective d Note: If the	late is listed, the dat date inserted in th	e must be specific and	d cannot be prior meet the applic	to date of filing or able statutory fil	more than 90 days a	fter filing.) Pursuant to 6 this date will not be li	05.0207 (3 isted as th
		syed effective of record is filed.		t an effective	e time, at 12:0:	1 a.m. on the ear	lier of:
JULY Dated	17		2017				
<u></u>	15		·				
_	( )	Summature of a	member or author	orized representati	ve of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00