

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZCOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-8800

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

RECEIVED

14 AUG 13 AM 7:00

VISION OF CORPORATIONS
BUREAU OF CONMERCIAL
INFORMATION SERVICES

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BOOYAH MORTGAGE, LLC

Certificate of Status	0
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Page Count	06
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AUG 1 4 2014

S. YOUNG

Electronic Filing Menu

Corporate Filing Menu

AUBIBIB 2014

S. YOUNG

* *	COVER LETTÈR	
TO: Registration Se Division of Cor	ection . rporations	
BOOYAH	I MORTGAGE, LLC	
SUBJECT:	Name of Limited Liability Company	-
The enclosed Articles of	Amendment and fee(s) are submitted for filing.	
Please return all correspo	ondence concerning this matter to the following:	
	Cheyenne Moseley	
	Name of Person	_
	Legalzoom.com, Inc.	o
	Firnt/Company	- ESC
	100 W. Broadway Suite 100	質 勇 四
	Address	
	Glendale, CA 91210	
	City/State and Zip Code	
	shane_johnson79@yahoo.com E-mail address: (to be used for future annual report notification)	- 第一声
For further information e	concerning this matter, please call:	
Imelda Vasquez	323 962-8600 ext 7950	
Name o	of Person Area Code Dayrime Telephone Numb	ber
Enclosed is a check for the	he following amount:	
□ \$25.00 Filing Fee	Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certificate Copy is enclosed)	Filing Fee, icate of Status & led 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability C	ompany as it now appears on our reconnited Liability Company)	rds.)
(A Florida Un	nited Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on 07/03/2014	and assigned
Florida document number 1.14000106140		
Florida document number		
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 "L	J.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	(S)	_
		≥8 ₹
		高島 南川
Enter new mailing address, if applicable:		7/3 7
(Mailing address MAY BE A POST OFFICE BOX)		ω -
		7
		معید اوران مدید موجد الحراج کرد
B. If amending the registered agent and/or registered agent and/or the new registered office address		ds, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	2022	
	Enter Florida street addr	re vs
		Florida
	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
AMBR	TIMOTHY SHANE JOHNSO	100 SAPPHIRE POINT UNIT 128	Add
		LAKE MARY, FL 32746	☑ Remove
AMBR	Timothy Shane Johnson	100 SAPPHIRE POINT UNIT 128	⊠ Add
		LAKE MARY, FL 32746	☐ Remove
			<u>≥8</u> = 74dd
			Remove
			Add
			Remove
			D Add
			Remove
			☐ Remove

			
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Affective date, i	if other than the date of fill nust be specific, cannot be prior to	iling:(option to date of receipt or filed date and cannot be more than 90 days after	al)
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the date this docum	if other than the date of fil nust be specific, cannot be prior to ment is filed by the Florida Departs August 11	tment of State)	al) er
the date this docum	ment is filed by the Florida Depart	tment of State)	al)
the date this docum	August 11	2014	al) er
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Filing Fee: \$25.00