

L15000025717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

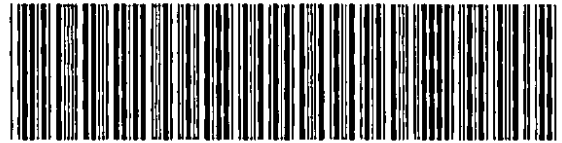
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2018 JUN -5 A 10:46

FILED

7/6/18 QS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 26, 2018

HOLLY CUTHBERTSON
2650 BROOKSIDE BLUFF LP
LAKELAND, FL 33813

*Correction
Made!
check for
\$25 has
been
added*

We have received your document for
check(s) totaling \$25.00. However, the enclosed document has not been filed
and is being returned for the following correction(s):

Document # and name listed on application don't match sunbiz.org records,
please revise.

Please return your document, along with a copy of this letter, within 60 days or
your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call
(850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 818A00013251



RECEIVED

2018 JUL -5 PM 12:09

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bond for Deed Management, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Holly Cuthbertson
Name of Person

Bond for Deed Management, LLC
Firm/Company

2150 Brookside Bluff Lp
Address

Lakeland, FL 33813
City/State and Zip Code

holly.cuthbertson@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Holly Cuthbertson at (985) 445-4877
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional 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

2018 JUN -5 A 10:46

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Bond for Deed Management, LLC

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

The Articles of Organization for this Limited Liability Company were filed on Feb 15th, 2015 and assigned
Florida document number L15000025717

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Mission Property Management, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new
registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, **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 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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

FILED
JUN 15 2015
MILWAUKEE
COUNTY
CLERK

2012 JUL -5 A 10:46
MILAN/SECURITY UNIT

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated June 22nd, 2018

Holly Cuthbertson
Signature of a member or authorized representative of a member

Holly Cuthbertson
Typed or printed name of signee