L1500057802

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THE RESERVE STATE INVESTOR OF BUREORATION

MMY 0.7 2015 C. 3: JCE

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

VANGUARD MO	RTGAGE MORT	ΓGAGE &				
FINANCE LLC						
			<u> </u>			
				Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation	S Net All See Elliph	
				Dissolution / Withdrawal	-	
				Annual Report / Reinstatement_		
			<u> </u>	Cert. Copy		,,
				Photo Copy		
			<u> </u>	Certificate of Good Standing		_
			✓	Certificate of Status		
				Certificate of Fictitious Name		_
				Corp Record Search		
				Officer Search	_	
				Fictitious Search	_ _ •	
Signature				Fictitious Owner Search		
			<u> </u>	Vehicle Search		
				Driving Record	_	
Requested by: BA	5/6/15			UCC 1 or 3 File	_	• •
Name	<u>5/0/15</u> Date	Time		UCC 11 Search	_	
Name	Date	Time		UCC 11 Retrieval		
Walk-In	Will Pick Up			Courier		

COVER LETTER

	gistration Sectivision of Corpo			
SUBJECT:	VANGUARD	MORTGAGE MORTGAG	E & FINANCE LLC	
SUBJECT:		Name of Lin	nited Liability Company	
The enclosed	l Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please return	all correspond	ence concerning this matter	to the following:	
		SERGIO LOPEZ DE MES	GA	
			Name of Person	
		VANGUARD PROPERTI	ES LLC	
			Firm/Company	
		2124 NE 123 ST STE 205		
			Address	
		NORTH MIAMI, FL 3318	1	
			City/State and Zip Code	-4
		SERGIOLDM@AOL.COM		An
	·	E-mail address: (to be used for future annual report notif	fication)
For further in	formation cond	cerning this matter, please or	all:	fication)
SERGIO LO	PEZ DE MESA	A	305 778-9955	Tolophore Number
	Name of Pe	erson	Area Code Daytime	e Telephone Number
Enclosed is a	check for the f	ollowing amount:		
□ \$25.00 Fi	ling Fee	□ \$30.00 Filing Fee & 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 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

	City	, Florida <u>Zip Code</u>
	Enter Florida street ad	
New Registered Office Address:		
Name of New Registered Agent:		
egistered agent and/or the new registered office address h		orus, enter the name of the ne
3. If amending the registered agent and/or registered	office address on our rece	
Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:		
Inter new mailing address if applicable		CO - I plant
		A
TOTAL TOTAL STATE OF THE SECTION ASSESSMENT TO SECTION ASSESSMENT		CD1
Principal office address MUST BE A STREET ADDRESS)		57
Enter new principal offices address, if applicable:		
he new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "	LLC" or the abbreviation "L.L.C."
VANGUARD LOANS LLC		_
A. If amending name, enter the new name of the limited li	iability company here:	
This amendment is submitted to amend the following:		•
Florida document number L15000057802		
The Articles of Organization for this Limited Liability Compa	any were filed on	and assigned
	04/01 <i>/2</i> 015	,
(Name of the Limited Liability Cor (A Florida Limit	npany as it now appears on our re- ed Liability Company)	cords.)
VANGUARD MORTGAGE & FINANCE LLC		

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			☐ Remove
			☐ Change
		 	Add
			☐ Remove
			☐ Change
			Add
			□ Remove
			□ Change
			□ Add
	,		□ Remove
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			Remove
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<u>ote:</u>	ive date, if other than the date of filing:
rec The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
ited _	APRIL 27 , 2015
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00