

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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	cument Number)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## • COVER LETTER

Div	ision of Corpo	orations			
SUBJECT:	ALG MORTO	GAGE "LLC"			
ocbole 1.		Name of Limi	ited Liability Company	<del></del>	
The enclosed	Articles of A	mendment and fee(s) are subr	mitted for filing.		
Please return	all correspond	dence concerning this matter	to the following:		
		ANNA GOLIK			
			Name of Person		
		ALG MORTGAGE LLC			
	Firm/Company				
		17529 MIDDLEBROOK WAY			
			Address		
		BOCA RATON FL 33496			
			City/State and Zip Code		
		E-mail address: (t	to be used for future annual report notific	eation)	
For further in	nformation con	cerning this matter, please ca	all:		
ANNA GOI	JK		561 303-6093		
•	Name of F	Person	at (at Code Daytime	l'elephone Number	
Enclosed is a	check for the	following amount:			
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Fiting 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

TO:

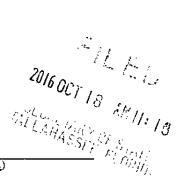
**Registration Section** 

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



ALG MORTGAGE "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 Lial	pility Company were filed on 2/4/2016	and assigned	
Florida document number L16000024087			
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company here:		
ALG MORTGAGE LLC			
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "I	LC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applical	ole: N/A		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:	<del></del>		
(Mailing address MAY BE A POST OFFICE B	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered agent and/or the new registered offi  Name of New Registered Agent:		rds, enter the name of the new	
New Registered Office Address:			
	Enter Florida street address		
		Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Re	gistered Agent:		
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the re company has been notified in writing of this circums.	and complete performance of my duties, ered agent as provided for in Chapter 60 gistered office address, I hereby confirm	and I am familiar with and 15, F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records: . 2016 OCT 18 AM 11: 13 MGR = Manager AMBR = Authorized Member <u>Title</u> **Address** Type of Action <u>Name</u> N/A .□ Add ☐ Remove ☐ Change □ Remove \_□ Change □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove \_□ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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	2016 OCT 18 ATT 11:
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	A A THE AND SET FI (12)
fective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be prior to te: If the date inserted in this block does not meet the applicate cument's effective date on the Department of State's records.	(optional) o date of filing or more than 90 days after filing.) Pursuant to 605.020 ble statutory filing requirements, this date will not be listed a
record specifies a delayed effective date, but not The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier of
ted OCTOBER 3 , 2016	
Signature of a member or authori	ized representative of a member

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Filing Fee: \$25.00