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Account Number : I20130000052
Phone : (407)909-9958

Fax Number

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CRETANY OF STALE AHASSEE, FLORIDA

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TAVISTOCK OSCEOLA, LLC

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Corporate Filing Menu

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TAVISTOCK OSCEOLA, LLC				
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.)			
The Articles of Organization for this Limited Liability Company Florida document number 1.16000059789	were filed on March 24, 2016	and as	signed	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
LAUREATE MORTGAGE, LLC				
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abi	oreviation "L	.L.C."	_
Enter new principal offices address, if applicable:			<del></del>	
(Principal affice address MUST BE A STREET ADDRESS)		<del></del>		
				_
		E.	- A	
Enter new mailing address, if applicable:			-52:	<del>-</del> ,
(Mailing address MAY BE A POST OFFICE BOX)		12 m	2	
		SS		y
		E T	***	مادادات بر
B. If amending the registered agent and/or registered of	Tice address on our records, enter	the name	<u>distance</u>	<u>her</u>
registered agent and/or the new registered office address here	<u>c</u> :	S 121	<u></u>	
		65	2	
Name of New Registered Agent:				_
New Registered Office Address:				
	Enier Florida street address			
	, Florida			
<del></del>	City	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peling filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am for provided for in Chapter 605, F.S. Or,	amilior wi if this doc	th and unient i	

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Títle</u>	Name	Address	Type of Action
PRES	RASESH THAKKAR	9350 Conroy Windermere Rd.	
		Windermere, FL 34786	Remove
			Chonge
VP	JEFFERSON R. VOSS	9350 Conroy Windermere Rd.	
		Windermere, FL 34786	□ Remove
		Change Jefferson R. Vass to MOR	<b>≅</b> Change
MGR	THOMAS B. YOUTH	9350 Conray Windermere Rd.	■ Arid
		Windermere, FL 34786	□ Remove
			Chings OV
MOR	CHRISTOPHER LA BATE	13024 Ballantyne Corporate Place	SSET TO
· · ·		Charlotte, NC 28277	P.CO.
			Ochange
MOR	SHAUN AHMAD	13024 Ballantyne Corporate Place	<b>=</b> Add
		Charlotte, NC 28277	🖸 Remove
			D Clunge
MGR	SCOTT SHULTZ	13024 Ballontyne Corporate Place	■ Add
		Charlette, NC 28277	☐ Remove
			🗆 Change
		<i>(((</i> Ъ1	6000284073 3)))

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). If amen	ding any other information, enter change(s) here: (Attach additional sheet	is, if necessary.)		
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			0	***************************************
<u>Note:</u> I docume	ve date, if other than the date of filling:  citive date is listed, the date must be specific and cannot be prior to date of filling or more than 90 filling the date inserted in this block does not meet the applicable statutory filling requirer nt's effective date on the Department of State's records.  ord specifies a delayed effective date, but not an effective time, at	(optional)  days after filing.) Pursuant to 603 ments, this date will not be list	0.0207 (ed as t	(3)(b) he
b) The	90th day after the record is filed.	ZZIOZ BIINI BII GIG GBIII	<b></b>	
Dated_	November 17 2017			
	Signature of a member or authorized representative of a mem	ber		
	JEFFERSON R. VOSS, MANAGER			
	Typed or printed name of signee			

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Filing Fee: \$25.00