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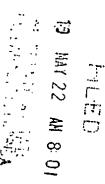
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PICK-UP WAIT MAIL
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O SIMMONS JUN 0 8 2019

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: HOV	I Met Your Name of Limit	Mortgase LUC ed Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspon	idence concerning this matter to	o the following:	
	Vincent	Tack Social Name of Person	
		Firm/Company	
	12700 66 th	St Apt 1124	
	Largo, FL	3 3 7 7 3 City/State and Zip Code	
		o be used for future as finual report notific	
For further information co	oncerning this matter, please ca	AI:	
Vincent 1 Name of	Sackson Person	at (937) 369 - Area Code Daytime	7027 Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing 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

How I Met Your (Name of the Limited	- Mortage	it now appears on our lity Company)	records.)	·
The Articles of Organization for this Limited Liab Florida document number	ility Company wer			and assigned
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of th	e limited liability	company here:		
The new name must be distinguishable and contain the word	is "Limited Liability C	Company," the designation		ation "L.L.C." 급
Enter new principal offices address, if applicab	le:			·
(Principal office address MUST BE A STREET)	ADDRESS)			
				22
				2 0
Enter new mailing address, if applicable:			' yes () '' yes () ''yes ()	<u> </u>
(Mailing address MAY BE A POST OFFICE BO	<u></u>		· · · · · · · · · · · · · · · · · · ·	2
	_			
B. If amending the registered agent and/or registered agent and/or the new registered offic		address on our re	ecords, enter the	name of the nev
Name of New Registered Agent:	Vincent	Jackson		
New Registered Office Address:		Enter Florida street	address	W 1858,
_			, Florida	
		City		in 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>	Name	Address	Type of Action
4mbr	Vincent Jackson	12700. 66th St Apt 1/24	Add
		12700. 66th St Apt 1124 Largo, FL 33773	Remove
			Change
			🗆 Add
			Remove
			□ Change
			Add Add Remove
		ا بر ا المراجعة المراجعة المراجعة المراجعة	Change
		·	🗆 Add
			□ Remove
			Change
			Remove
			□ Add
			Remove
			Change

	I was margre that I needed to be both
-	the Registered Agent and also a Athenseal
-	member to do biginess and open a Bank
-	Account for my LLC.
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	ve date, if other than the date of filing:
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
4,000,,,,	site of the separation of the
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
,	
Dated_	may 20th. 2019.
	1/2/ Puly
	Signature of a member or authorized representative of a member Vincent Jacks Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00