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COVER LETTER

Division of Co	rporations		
FOREST I	HILLS ACQUISITION, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for tiling.	
Please return all corresp	ondence concerning this matter	to the following:	
	ALEJANDRO PEREZ		
		Name of Person	
		Finn/Company	
	9415 SUNSET DRIVE. SI	UITE 157	
	MIAMI, FL 33173	Address	
	ALEXPEREZMTG@GMA	City/State and Zip Code IL.COM	
		to be used for future annual report notif	fication)
For further information of	concerning this matter, please co	all:	
ALEJANDRO PEREZ		305 595-8616 a1 ()	
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he 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:

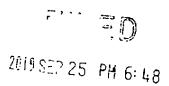
TO:

Registration Section

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



FOREST HILLS ACQUISITION, LL	С	
(Name of the Limited	Liability Company as it now appears on our records.) Florida Limited Liability Company)	•
The Articles of Organization for this Limited Liab Florida document number L19000084900	bility Company were filed on 3/27/2019	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
AIM MORTGAGE LLC		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET		
Timeipat office address most be A STREET	ADDRESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	r registered office address on our records, <u>enter</u> ce address here:	the name of the ne
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 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>	Type of Action
MGR	ILDEFONSO PEREZ	9415 SUNSET DRIVE, SUITE 157 MIAMI, FL 33173	
			Remove
			Change
MGR	ALEJANDRO E. PEREZ	9415 SUNSET DRIVE, SUITE 157 MIAMI, FL 33173	⊟ Add
			☐ Remove
			Change
			Add
			Remove
			□ Change
			□ Remove
			Change
			Add
			□ Remove
			☐ Change
		.	O Add
			□ Remove
			☐ Change

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f an ef <u>Note:</u>	five date, if other than the date of filing: [rective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
ne re	cord 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.
The	
The	SEPTEMBER 22 2019
The	SEPTEMBER 22 2019 Signature in a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00