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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Illome Ucrtagge LLC (name change to Name of Linged Jability Company Conflortgage LL) C
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Michael Schoonover	
Firm/Company	
420 Sw 128 ave	
Mami FL 33184 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Michael Schoonaver at (954 494-7288 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Solution Status Status Solution Status Solution Status Status Solution Status Solution Status Solution Status Solution Status Solution Status Status Solution Status Solution Status Solution Status Solution Status Solution Status Status Solution Status	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(;)

ARTIC	CLES OF O	PRGANIZATION		1
	O	F	6	-
1 Hcme Mor	1979 C I Liability Compa Florida Limited I	ny as it now appears on our re Liability Company)	20 A 3.	コフ
The Articles of Organization for this Limited Lia Florida document number 4 1900186	bility Company <u>4124</u> .	were filed on July	7, Zo19 and assigned	
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liabi	lity company here:		
OnMortage	at 16	· ,		
The new name must be distinguishable and contain the woo	"Limited Liabil	ity Company," the designation	'LLC" or the abbreviation "L.L.C."	_
• •		420 Sw	128 ave	_
(Principal office address MUST BE A STREET	<u>ADDKESS)</u>	7000	1 2 33/0	_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	470 SW	128 ave 2 33184	_ _ _
		ddress on our records, <u>e</u>	iter the name of the new regis	<u>tered</u>
Name of New Registered Agent:				
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Chael Schanover Uzo Su 128 ave Enter Florida streat address Ent	-			
	Llia	ami	, Florida 33184	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: Manual Schael Schaener				

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>	<u>Name</u>	Address	Type of Action
			□Add
			□ Remove
			Change
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
		□ Add	
			□ Remove
			□Change
			□ Add
			□Remove

Effective date, if other than the date of filing: [If an effective 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. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed. Dated When I are the specifies and delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed. Signature of a member of authorized representative of a member Fyped or printed name of signee			
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