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(Req	uestor's Name)	
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	ress)	
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R. WHITE MAR 2 3 2020

COVER LETTER

TO:

Registration Section

Division of Corp	porations		
SUBJECT. INTER	untinnal martaan	Partners 116	
SUBJECT: TITICI	National Mortgage	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Ozlem R	Oychok Name of Person	
		Name of Person	
	Internation	<u>Mal Mortgage Partne</u>	rs LLC
		Firm/Company	
	34 Brighton	A	
•		Address	
	Bula Raton,	FL 33434	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information co	oncerning this matter, please co		•
Jennifer Name of	Moody	at (<u>954</u>) <u>423</u> - Area Code Daytime	-3577
Name of	retson	Area Code Dayting	receptione is unioer
Enclosed is a check for the	e following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
		, , , , , , , , , , , , , , , , , , , ,	(additional copy is enclosed)
Mailing Address		Street Address:	
Registration S Division of Co		Registration Sec	
P.O. Box 6323		Division of Corp The Centre of T	
Tallahassee, F			Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

international Mortgage Partners 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 Liab Florida document number <u>L2000014509</u>		were filed on <u>2</u>	11/2020	and assigned
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the	ne limited liabil	lity company he	re:	
The new name must be distinguishable and contain the word	Is "Limited Liabili	ty Company," the de	esignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:			
(Principal office address MUST BE A STREET)	ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0x)</u>			
B. If amending the registered agent and/or registered agent and/or the new registered office address h		ddress on our re	ecords, <u>enter the na</u>	ime of the new registered
Name of New Registered Agent:	Ozlem	, Raychok	.	
New Registered Office Address:	34 B	righton A	ida street address	
	BOCA R	aton	, Florida	33434
•		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 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
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			Change
			□Remove
		☐ Change	
		□Remove	
		□Change	
			□Add
			□Remove
			□Change

. If amer	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effer Note: I	the date, if other than the date of filing:
the record ford is file	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 d.
Dated _	Feb 01. 2020
	Signature of a member or authorized representative of a member
	Typed or printed name of signee