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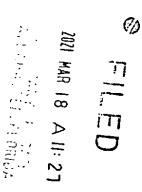
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COVER LETTER

то:	Registration Se Division of Cor				
CUB IE		d Mortgage LLC	·		
SUBJEC	۵۱:				
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		T Des Jardin			
			Name of Person	-	
		Seek & Find Mortgage LL	Seek & Find Mortgage LLC Firm/Company		
		3300 Wilshire Way Road			
					
		Orlando Fl. 32829			
			City/State and Zip Code	_ 	
		desjardint@yahoo.com	to be used for future annual report notific	ation)	
For furth	ner information c	concerning this matter, please c			
T Des Ja	ardin		407 403-0845		
	Name o	of Person	Area Code Daytime 1	l'elephone Number	
Enclosed	d is a check for the	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 Registration 3 Division of C P.O. Box 632 Tallahassec.	Section Corporations 27	Street Address: Registration Section Division of Corporate Centre of Tale 2415 N. Monroe	orations & D	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Seek & Find Morigage LLC	
(Name of the Limited Liability Company (A Florida Limited Lia	r as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company we Florida document number L21000097310	vere filed on March 1st, 2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	idress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	City Florida Zin Code
New Registered Agent's Signature, if changing Registered Agent:	, in

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 his 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>	Address	Type of Action
AMBR	T Des Jardin	3300 Wilshire Way Road Orlando Fl, 32829	□Add
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Effective date, if other than t	the date of fili	ng:		(0	ptional)		
fan effective date is listed, the date in Note: If the date inserted in this document's effective date on the	s block does not	meet the applic	able statutory fili	nore than 90 days a ng requirements.	this date w	ursuant to ill not be	605.0207 (listed as t
record specifies a delayed effect d is filed.	ctive date, but no	ot an effective t	ime, at 12:01 a.m	on the earlier of	(b) The	90th day	after the
Dated March 15th		2021			2	2021	Ø
		/				_	
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Filing Fee: \$25.00

Typed or printed name of signee