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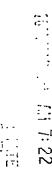
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COVER LETTER

TO: Registration S Division of Co					
	RTGAGE LLC				
SUBJECT: Name of Limited Liability Company					
	f Amendment and fee(s) are sub condence concerning this matter	-			
	BRIAN FERNANDEZ				
		Name of Person		_	
	PRO MORTGAGE LLC				
		Firm/Company		-	
	3343 2ND AVE NE			· :	ä
		Address		_	<u> </u>
	NAPLES, FL 34120				M: 7: 22
	BIZBYBRIAN@GMAIL.C	City/State and Zip Code	 .	— 1.;	10
	-	to be used for future annual report noti	fication)	-	
For further information	concerning this matter, please c	all:			
BRIAN FERNANDEZ		239 285-7118			
Name	of Person	at ()	ne Telephone Numl	ber	_
Enclosed is a check for	the following amount:				
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifi	Filing Ficate of Sied Copy	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

UNKNOWN LIMO SERVICES LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limited	nany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Companies of Organization for this Liability Companies of Organization for this Liability Companies of Organization for the Organization for this Liability Companies of Organization for the Organization for t	y were filed on 01/29/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
PRO MORTGAGE LLC		
he new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		; *
Principal office address MUST BE A STREET ADDRESS)		1,1
The put office mures meg 1 DE A STREET ADDRESS)		D
	-	
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
 If amending the registered agent and/or registered office gent and/or the new registered office address here: 	address on our records, enter the nan	ne of the new regist
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>	Name	Address	Type of Action
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: 03/15/2024 __ (optional) (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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If 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 record is filed. 2024 Signature of a member or authorized representative of a member BRIAN FERNANDEZ

Filing Fee: \$25.00

Typed or printed name of signee