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To:

Division of Corporations

Fax Number : (850)617-6383

From:

TEO STATES ACCOUNT Name : CORPORATE CREATIONS INTERNATIONAL IN

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)214-8442

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address	•		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HOMEOWNERS MORTGAGE, LLC

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C. BRUMBLEY

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2822 AU: 13

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Homeowners Mortgage,	LLC		
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appea Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000518865</u>			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company h	ere:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the d	lesignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	90 North Re	oyal Tower Drive,	
	<u>Irmo, SC 29</u>	0063	A B T
Enter new mailing address, if applicable:			18 18 14 15 15 15 15 15 15 15 15 15 15 15 15 15
(Mailing address MAY BE A POST OFFICE BOX)	90 North Re	oyal Tower Drive.	
	<u>lrmo, SC 29</u>	063	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our r	ecords, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enser Flor	ida 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 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>Titte</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
		·	□ Remove
			□ Change
			□Add
			□Remove
			Change
			□ Add
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			□ Change

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	ive date, if other than the date of filing: [cetive 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 605.0 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed tent's effective date on the Department of State's records.
record	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after led.
ated _	August 18 , 2022 .
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00