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SECRETARY OF STATE STORE OF CORPORATION

T. MATTHEWS APR 27 2022

COVER LETTER

	Registration Se Division of Cor			
SUBJEC [*]	FPL Mortg	age LLC	•	
SUBJEC	·	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please rett	urn all correspo	ondence concerning this matter	to the following:	
		Rasheem Edward		
			Name of Person	
	Name of Limited Liability Company closed Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: Rasheem Edward			
			Firm/Company	ress Ind Zip Code Inture annual report notification) 4
		5511 Parkerest Dr. Suite 1	03	
			Address	
		Austin, TX 78731		
				otification)
For furthe	r information c			
Zenbusino	ess c/o Rasheer	n Edward		
	Name o	f Person	Area Code Dayt	ime Telephone Number
Enclosed i	is a check for th	ne following amount:		
\$25.0 0	0 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
F	<u>Aailing Addres</u> Registration S Division of C	Section	Street Address: Registration S Division of C	

P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



22 APR 11 AM 8: 35

FPL Mortgage LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

ility company here:	
lity Company," the designation "LLC" or	the abbreviation "L.L.C."
1801 N Flagler Dr Apt# 335	
West Palm Beach, FL 33407	
1801 N Flagler Dr Apt# 335	
West Palm Beach, FL 33407	
address on our records, <u>enter the</u>	name of the new registered
Enter Florida street address	
, Floric	la Zip Code
1	ity Company," the designation "LLC" or 1801 N Flagler Dr Apt# 335 West Palm Beach, FL 33407 1801 N Flagler Dr Apt# 335 West Palm Beach, FL 33407 Address on our records, enter the

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>	<u>Name</u>	Address	Type of Action
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			DAdd
			□Remove
			□Change
			
			□Remove
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			□Remove
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Tective date, if other than than effective date is listed, the date in ote: If the date inserted in this ocument's effective date on the	ust be specific and cannot lolock does not meet the	applicable statu			
record specifies a delayed effect is filed.	ve date, but not an effe	ctive time, at 12:	:01 a.m. on the ear	lier of: (b) The 90th	day after the
	2022				
ated	·	 ·			
ated 4/5 /S/Frank Lyon	Signature of a member				