

MO1000001873

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

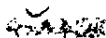
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/16/04--01009--007 **30.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 FEB 13 PM 4:09

AMAXIMIS

Lending, L.P.

February 12, 2004

Florida Dept of State
Registration Section
Division of Corporations
Tallahassee, FL 32399

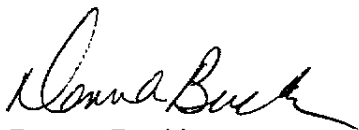
Re: Address Change – Amaximis Company, L.L.C.

To Whom It May Concern:,

Enclosed is the amendment to our application in order to change the address of Amaximis Company, L.L.C. along with a check for \$30.00 for filing and a certified copy of that filing.

If you have any questions, or if any additional information is required, please contact me at (817) 252-3122.

Sincerely,



Donna Buckley
Vice President

Enc.

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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO
FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: Amoximis Company L.L.C.
2. Jurisdiction of its organization: TEXAS
3. Date authorized to do business in Florida: 8-17-01

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? _____
5. New name of the limited liability company: _____
6. If the amendment changes the period of duration, indicate new period of duration: _____
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: Street address of principal office is
3221 Collinsworth St. #200, Ft. Worth, TX 76107-6531
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Donna L. Buckley
Signature of a member or the authorized
representative of a member

Donna L. Buckley
Typed or printed name of signee

Filing Fee: \$25.00

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