

mos000000909

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

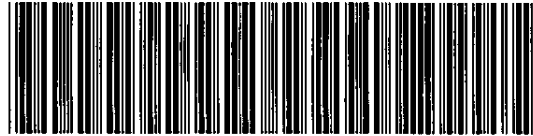
mos-909

(Document Number)

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TALLAHASSEE, FLORIDA

NRC

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AmeriFirst National Financial of Lakeland, L.L.C.  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Boesch

(Name of Person)

(Firm/Company)

2536 Countryside Blvd., 6th Floor

(Address)

Clearwater FL 33763

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Boesch

(Name of Person)

at ( 727 ) 726-0726

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☐ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☒ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 24, 2007

MICHAEL BOESCH  
2536 COUNTRYSIDE BLVD., 6TH FLOOR  
CLEARWATER, FL 33763

SUBJECT: AMERIFIRST NATIONAL OF LAKELAND, LLC  
Ref. Number: M05000000909

We have received your document for AMERIFIRST NATIONAL OF LAKELAND, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name in the document does not match our records or the name in the Certificate.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan  
Document Specialist

Letter Number: 307A00051236

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT  
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: AmeriFirst National of Lakeland, L.L.C.

2. Jurisdiction of its organization: Delaware

3. Date authorized to do business in Florida: February 7, 2005

**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? August 16, 2007

5. New name of the limited liability company: Interstate First Financial of Lakeland, L.L.C.  
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

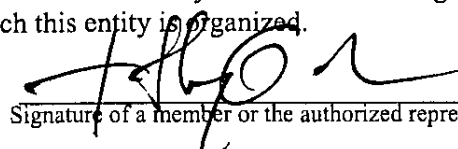
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

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: \_\_\_\_\_
- \_\_\_\_\_

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.

  
Signature of a member or the authorized representative of a member

Timothy O. North

Typed or printed name of signee

**Filing Fee: \$25.00**

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "AMERIFIRST NATIONAL OF LAKELAND LLC", CHANGING ITS NAME FROM "AMERIFIRST NATIONAL OF LAKELAND LLC" TO "INTERSTATE FIRST FINANCIAL OF LAKELAND, L.L.C.", FILED IN THIS OFFICE ON THE FIFTEENTH DAY OF AUGUST, A.D. 2007, AT 3:30 O'CLOCK P.M.



3913716 8100

070925479

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5930529

DATE: 08-16-07

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 03:30 PM 08/15/2007  
FILED 03:30 PM 08/15/2007  
SRV 070925479 - 3913716 FILE

**STATE OF DELAWARE  
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: AMERIFIRST NATIONAL  
OF LAKELAND, L.L.C.
2. The Certificate of Formation of the limited liability company is hereby amended  
as follows:

The Name of the L.L.C. shall be changed to:  
Interstate First Financial of Lakeland, L.L.C.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on  
the 15 day of August, A.D. 2007.

By: [Signature]  
Authorized Person(s)

Name: Timothy O North L.L.C. Mgr  
Print or Type