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(R€	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	<u>, </u>
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(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
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G. MCLEOD

FEB 2 2 2008

EXAMINER

COVER LETTER

	on Section of Corporations		
SUBJECT: CF			
	(Name of Fo	reign Limited Liability (Company)
Dear Sir or Madam	:		
The enclosed appli	cation, certificate and fee(s)	are submitted for filing.	
Please return all co	rrespondence concerning thi	s matter to the following	; :
Merle H. K	OONTZ (Name of Person)		-
Chambliss,	Bahner & Stoph (Firm/Company)	iel, P.C.	
1000 Talla	n Building, Two (Address)	Jnion Square	-
Chattanoo	ga, TN 27402-25 (City/State and Zip Co		
For further informat	tion concerning this matter, p	olease call:	
Merle H. Koo	ontz	at (423)_321-0304
1)	lame of Person)	(Area Code &	Daytime Telephone Number)
Registratio Division o Clifton Bu 2661 Exec	f Corporations	Regist Divisio P.O. B	ration Section on of Corporations lox 6327 assee, Florida 32314
Enclosed is a check	for the following amount:		
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	✓ \$60 Filing Fee, Certificate of Status & Certified Copy

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 State: CFCS LLC	t of	
2.	Jurisdiction of its organization: Delaware		
3.	Date authorized to do business in Florida: May 31, 2007		
	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? February 15, 2008		0
5.	New name of the limited liability company: Allied Title Lending LLC	80	DIVIS
6.	If the amendment changes the period of duration, indicate new period of duration:	FEB 21	22
7.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	PH 3: 25	OF CORPORATION
8.	If the amendment corrects any false statement, indicate the statement being corrected and the correction:		O¥:
- -	Attached is an original certificate, no more than 90 days old, evidencing the aforemention amendment(s), duly authenticated by the official having custody of records in jurisdiction under the law of which this entity is organized. Signature of a member or the authorized representative of a member		
	Ronald D. Gorsline Attorney		

Filing Fee: \$25.00

Typed or printed name of signee

1.

Name of Limited Liability Company: CFCS LLC

....

State of Delaware Secretary of State Division of Corporations Delivered 11:15 AM 02/15/2008 FILED 11:15 AM 02/15/2008 SRV 080167403 - 4356683 FILE

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

	ne of the limited liability company is chang las follows:
First:	The name of the limited liability company Allied Title Lending LLC
1	
[
	ESS WHEREOF, the undersigned have executed this Certificate
IN WITN	ESS WHEREOF, the undersigned have executed this Certificate day of February , Ap. 2008

Delaware

PAGE

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 "CFCS LLC", CHANGING ITS NAME FROM "CFCS LLC" TO "ALLIED TITLE LENDING LLC", FILED IN THIS OFFICE ON THE FIFTEENTH DAY OF FEBRUARY, A.D. 2008, AT 11:15 O'CLOCK A.M.

4356683 8100

080167403

Harriet Smith Windson, Secretary of State

AUTHENTICATION: 6387169

DATE: 02-15-08

You may verify this certificate online at corp.delaware.gov/authver.shtml