

10/11/2013 9:18:33 am: To 8061638

Division of Corporations

1/5

of 1

M130000001291

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000224090 3)))



H130002240903ABCV

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 OCT - 8 AM 8:57

FILED

****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
SHELTER LENDING SERVICES, L.L.C.**

Certificate of Status	0
Certified Copy	0
Page Count	045
Estimated Charge	\$25.00

RE-SUBMIT

Electronic Filing Menu

Corporate Filing Menu

Help

Please retain original filing
date of submission 10/8

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shelter Lending Services, L.L.C.

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Emily Vincent

Name of Person

NRAI Corporate Services, Inc.

Firm/Company

2875 Michelle Dr., Suite 100

Address

Irvine, CA 92606

City/State and Zip Code

evincent@nrai.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Emily Vincent at (800) 562-6439

Name of Person

Area Code and 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

☐ \$55.00 Filing Fee &
Certified Copy

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



October 9, 2013

FLORIDA DEPARTMENT OF STATE

Division of Corporations

SHELTER LENDING SERVICES, L.L.C.
4000 W. BROWN DEER ROAD
BROWN DEER, WI 53209

SUBJECT: SHELTER LENDING SERVICES, L.L.C.
REF: M13000001291

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Because the above referenced out-of-state limited liability company cannot file an annual report form until January 1st of the next calendar year, the entity must complete the AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S), to amend the manager(s) or managing member(s) on our records.

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) 245-6051.

Teresa Brown
Regulatory Specialist II

FAX Aud. #: H13000224090
Letter Number: 313A00023716

RE-SUBMIT

Please retain original filing
date of submission 10/8

RECEIVED
13 OCT 11 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
13 OCT -8 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Shelter Lending Services, L.L.C.

2. This entity was formed under the laws of: Illinois

3. This entity was authorized to transact business in Florida on 2/27/2013
and its Florida document/registration number is M13000001291

4. The name and address of each manager or managing member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Shelter Mortgage Company, L.L.C.
4000 Brown Deer Road, Suite #E
Brown Deer, WI 53209

MGRM

Jill Belconis
4000 Brown Deer Road, Suite #E
Brown Deer, WI 53209

MGRM

Paul Buege
4000 Brown Deer Road, Suite #E
Brown Deer, WI 53209

MGRM

John Heroff
4000 Brown Deer Road, Suite #E
Brown Deer, WI 53209

MGRM

Kim Shelton
4000 Brown Deer Road, Suite #E
Brown Deer, WI 53209

Required Signature: _____

Jill Belconis
Signature of Manager, Managing Member or Member

Filing Fee: \$25

10/11/2013 9:18:33 From: To: 8506176383

(5/5)

Question #8

- 1) Please change principal address to:

4000 W. Brown Deer Road, Suite #E, Brown Deer, WI 53209

- 2) Please add the following managers and business address:

Jill Belconis (EVP) – 4000 W. Brown Deer Road, Suite #E, Brown Deer, WI 53209

Paul Buege (SVP) – 4000 W. Brown Deer Road, Suite #E, Brown Deer, WI 53209

John Heroff (VP) – 4706 McDonald Drive Place, Stillwater, MN 55082

Kim Shelpman (SVP) – 8240 Devereaux Drive. Suite #102, Melbourne, FL 32940