

MI4000000263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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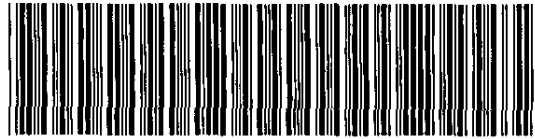
(Business Entity Name)

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DATE: 9/19/14

NAME: ANGEL OAK MORTGAGE SOLUTIONS LLC

TYPE OF FILING: AMENDMENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Angel Oak Mortgage Solutions LLC
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:

Eric Wolz

Name of Person

Wolz Corporate USA, Inc.

Firm/Company

36 South 18th Avenue, Suite D

Address

Brighton, CO 80601

City/State and Zip Code

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

For further information concerning this matter, please call:

Eric Wolz

Name of Person

at (303) 655-9659

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

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TALLAHASSEE FLORIDA

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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY 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: Angel Oak Mortgage Solutions LLC
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: January 14th, 2014

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

4. New name of the limited liability company: _____
(must contain "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 contain "Limited Liability Company," "L.L.C." or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change: _____

See attached "Exhibit A" for updated Member and Manager information

7. Attached is an original certificate, if required: 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 the authorized representative

Mike Fierman, Managing Member

Typed or printed name of signee

Filing Fee: \$25.00

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IN ALACHUA COUNTY
FLORIDA

Exhibit A
to
Amendment to Certificate of Authority
for
Angel Oak Mortgage Solutions LLC

The Members of the Limited Liability Company are as follows:

AOMS Holdco LLC

3060 Peachtree Road NW, Suite 500 B
Atlanta, GA 30305

Mike Fierman

3060 Peachtree Road NW, Suite 500 B
Atlanta, GA 30305

Sreeni Prabhu

3060 Peachtree Road NW, Suite 500 B
Atlanta, GA 30305

Steven Schwalb

3060 Peachtree Road NW, Suite 500 B
Atlanta, GA 30305

The Manager of the Limited Liability Company is as follows:

Mike Fierman

3060 Peachtree Road NW, Suite 500 B
Atlanta, GA 30305

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