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COVER LETTER

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CR2E062 (2/14)

TO: Registration Division of	Section Corporations			
SUBJECT: First	Heritage Mortgage, L	LC Name of Limited Liab	ility Company	_
			,	
Dear Sir or Madam:				
The enclosed Statem	ent of Correction and fee(s)	are submitted for filing	g.	
Please return all corr	espondence concerning this	matter to the following	3:	
Denise Draper		·		
	Name of Person		-	
First Heritage M	lortgage, LLC			
	Firm/Company		-	
3201 Jermantov	wn Road, Ste: 800			到节日
	Address		-	経過一日
Fairfax, VA 220)30			ED 88
	City/State and Zip Code		-	? 38
awish@fhmtg.c	om			**Inger
E-mail address	: (to be used for future annu	al report notification)	-	
For further informati	ion concerning this matter, p	olease call:		
Denise Draper		703	259-0766	
Na	me of Person	at (Area Code	Daytime Telephone Number	
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	tions ter Circle		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 OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. The name of the limited liability company is:____ FIRST: The Florida Document number of the limited liability company is: M15000005140 SECOND: THIRD: Document to be corrected is: Foreign Limited Liability Company (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT V Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Alex Wish (already listed) and Jerry Berry, (Executive VP, 3201 Jermantown Rd Ste: 800, Fairfax, VA 22030) both have managing authority. Steve Alloy and Martin Alloy are board members, but neither have managing authority nor participate in the daily operations of the company. Please remove. <u>OR</u> П Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR The electronic transmission of the record was defective. - Alex Wish President

Filing Fee: Certified Copy:

\$25.00

\$30.00 (optional)

Signature of Authorized Representative