

M20000006648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

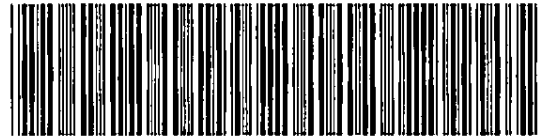
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/26/21--01029--024 \*\*25.00

REWRITE  
MAY 12 2021

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Premier Mortgage of Bloomfield, 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:

Sandy Mamo

\_\_\_\_\_  
Name of Person

Mark K Rabidoux, PLC

\_\_\_\_\_  
Firm/Company

PO Box 1287

\_\_\_\_\_  
Address

Ann Arbor, MI 48106

\_\_\_\_\_  
City/State and Zip Code

smmamo@sbeglobal.net

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

For further information concerning this matter, please call:

Sandy Mamo

at ( 734 ) 994-6523

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Premier Mortgage of Bloomfield, LLC

Enter new principal office address, if applicable: \_\_\_\_\_

(Principal office address

MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address

MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M20000006648

3. Jurisdiction of its organization: Michigan

4. Date authorized to do business in Florida: 07/21/2020

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: Capital Home Mortgage, LLC  
(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.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida Street Address*

\_\_\_\_\_, **Florida**

*City*

*Zip Code*

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

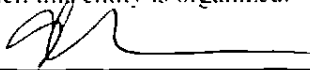
\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

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

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

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Member	Sean Abro	6001 N. ADAMS RD, SUITE:150	<input checked="" type="checkbox"/> Add
		Farmington Hills, MI 48331	<input type="checkbox"/> Remove
Member	Dean Abro	6001 N. ADAMS RD, SUITE:150	<input type="checkbox"/> Add
		Farmington Hills, MI 48331	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a 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.

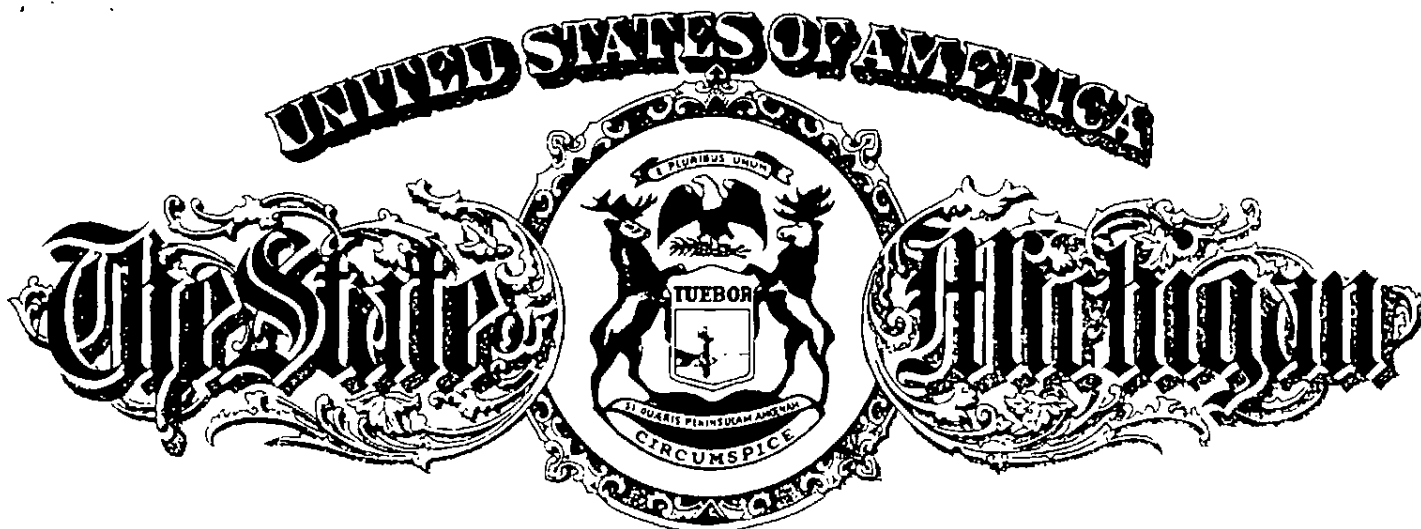


Signature of the authorized representative

Sandy Rabidoux

Typed or printed name of signee

**Filing Fee: \$25.00**



**Department of Licensing and Regulatory Affairs**  
**Lansing, Michigan**

*This is to Certify That*

**CAPITAL HOME MORTGAGE, LLC**

*was validly formed as a Michigan domestic limited liability company on April 21, 2020.*

*I FURTHER CERTIFY that a Certificate of Amendment to the Articles of Organization was filed on February 2, 2021, amending Article I, changing the limited liability company name from **PREMIER MORTGAGE OF BLOOMFIELD, LLC** to **CAPITAL HOME MORTGAGE, LLC**.*

*This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.*

*In testimony whereof, I have hereunto set my hand,  
in the City of Lansing, this 2nd day of February, 2021.*

*Linda Clegg*



Linda Clegg, Director  
Corporations, Securities & Commercial Licensing Bureau