## M22000016039

(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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13/02/22--010/9--013 \*+35. [

## **COVER LETTER**

то:	~	tration S on of C	Section orporations				•
SUBJI	ECT:	Unity Ho	me Loans, LLC				
			Name of Foreig	gn Limited Liab	oility Cor	mpany	
Dear S	Sir or M	adam:					
The en	closed	applicat	ion, certificate and fee(s)	) are submitted	for filing	<u>y</u> .	
Please return all correspondence concerning this matter to the						ng:	2022 DEC -2
Andrew	v C. Hall	1					ATE DEC
			Name of Person		-		<b>**</b> .
Keller 3	Mortgag	e, LLC					(No. 10)
			Firm/Company		_		E E E E E E E E E E E E E E E E E E E
4725 La	akehurst	Ct., Suit	e 400				
			Address		<del>-</del>		
Dublin.	OH 430	)16					
			City/State and Zip Cod	le	_		
andrew	.hall@k	ellermort	gage.com				
E-m	ail add	ress: (to	be used for future annua	il report notifica	ation)		
For fur	ther in	formatic	on concerning this matter	· please call·			
Andrew		ioimatic	in concerning this matter	614	953-91	104	
	<u>-</u>	Name	of Person	_ at ( Area Code	_) : & Dayt	time Telephor	ne 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				
■\$25 CR2E05	Filing		check for the following  ☐ \$30 Filing Fee &  Certificate of Status	g amount: ☐ \$55 Filing  Certified (			ng Fee, cate of Status & tified 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)

<ol> <li>Name of limited liability Company as it appears on the</li> </ol>	records of the Florida Department of
State: Unity Home Loans, LLC	
Enter new principal office address, if applicable:	
(Principal office address  MUST BE A STREET ADDRESS)	
	<del></del>
	2022 DEC
Enter new mailing address, if applicable: (Mailing address	
MAY BE A POST OFFICE BOX)	
	- 1
2. The Florida document number of this limited liability c	ompany is: M22000016039
3. Jurisdiction of its organization: Delaware	
4. Date authorized to do business in Florida: 10/10/2022	
SECTION II (5-9 complete only the applicable change	s)
5. New name of the limited liability company: (must contain	n "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the copy of the written consent of the managers or managing must contain "Limited Liability Company," "L.L.C." or "	members adopting the alternate name. The alternate nam
6. If amending the registered agent and/or registered office registered agent and/or the new registered office address had been addressed to the new registered of the registered of the new registere	
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:

Thereby 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.

Title/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action	
Officer	Rhonda Gallion	552 Garfield St.	<b>=</b> Add	
		Denver, CO 80206	□Remo	
Officer	Travis Grant	3836 Browning St.	<b>=</b> Add	
		San Diego, CA 92107	□Remo	
Member	Keller Ventures, LLC	4725 Lakehurst Ct., Suite 400	□Add	
		Dublin, OH 43016	<b>=</b> Remo	
			SECRED Add	
aforementio	under the law of which this entity	cated by the official having custody of records in the	□Remo	

Filing Fee: \$25.00 4