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SUBJECT: Name of Limited Liability Company				
Articles of	Amendment and fec(s) are sub	mitted for filing.		
		-		
	BRIAN MANDEL			
		Name of Person		
		Firm/Company		
	7292 7TH ST N			
	,	Address		
	ST PETERSBURG, FL 33	702		
	CHARGE MANIBEL CONTRA	City/State and Zip Code		
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iformation ed		·	Treation)	
ANDEL		727 3596898		
Name of	f Person		te Telephone Number	
check for th	e following amount:			
iling Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section		Street Address: Registration Section		
Division of Corporations		Division of Corporations		
		The Centre of T		
	Articles of all corresponding Address gistration Spision of CD. Box 632	Articles of Amendment and fee(s) are subtall correspondence concerning this matter BRIAN MANDEL 7292 7TH ST N ST PETERSBURG, FL 33 SHAREE.MANDEL@OUT E-mail address: (afformation concerning this matter, please concerning this matter, please concerning the second state of Status) ANDEL Name of Person check for the following amount: filing Fee \$30.00 Filing Fee & Certificate of Status ling Address: pistration Section rision of Corporations Box 6327	BSN MOBILE NOTARY NETWORK, LLC Name of Limited Liability Company Articles of Amendment and fec(s) are submitted for filing. all correspondence concerning this matter to the following: BRIAN MANDEL Name of Person Firm/Company 7292 7TH ST N Address ST PETERSBURG, FL 33702 City/State and Zip Code SHAREE.MANDEL@OUTLOOK.COM E-mail address: (to be used for future annual report not offermation concerning this matter, please call: ANDEL Name of Person at (

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



BSN MOBILE NOTARY NETWORK, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 04/25/2019	and assigned		
Florida document number L19000113178				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
BSN TRANSACTION MANAGEMENT, LLC				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."		
Enter new principal offices address, if applicable:	360 CENTRAL AVENUE, 8TH FLOOR			
(Principal office address MUST BE A STREET ADDRESS)	ST. PETERSBURG, FL 33701			
	<u> </u>	,		
Enter new mailing address, if applicable:	7292 7TH ST N			
(Mailing address MAY BE A POST OFFICE BOX)	ST PETERSBURG, FL 33702			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the nam</u>	e of the new registered		
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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			Remove
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If the recor record is fi	rd specifies a delayed e led.	ffective date, but	not an effective time	e, at 12:01 a.m. on	the carlier of: (b)	The 90th day after th	e
Dated	12/10/2019						
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	SHAREE MAND		i a member or authoriz	BR (An) M	a member		

Typed or printed name of signee