

6/27/2019

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Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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A
STATE OF FLORIDA

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : KATZ BASKIES LLC
Account Number : I2088000071
Phone : (561)910-5700
Fax Number : (561)910-5701

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
NEW DAY FINANCIAL SOLUTIONS LLC**

Certificate of Status	0
Certified Copy	0
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STATE OF FLORIDA

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Corporate Filing Menu

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JUN 28 2019

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEW DAY FINANCIAL SOLUTIONS LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas O. Katz

 Name of Person

Katz Baskies & Wolf PLLC

 Firm/Company

3020 North Military Trail Suite 275

 Address

Boca Raton, FL 33431

 City/State and Zip Code

thomas.katz@katzbaskies.com

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

TALLAHASSEE, FLORIDA
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For further information concerning this matter, please call:

Thomas O. Katz at (561) 910-5700

 Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing 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
 Division of Corporations
 P.O. Box 6327
 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
 Registration Section
 Division of Corporations
 Clifton Building
 2661 Executive Center Circle
 Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H19000199330 3

New Day Financial Solutions 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 June 5, 2019 and assigned Florida document number L19000149317

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices 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)

B. If amending the registered agent and/or registered office 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

City

Florida

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: H19000199330 3

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	MICHAEL GRIFFITH	4613 N UNIVERSITY DR. #211 CORAL SPRINGS, FL 33067	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SUNRISE FINANCIAL SOLUTIONS LLC	4613 N UNIVERSITY DR. #211 CORAL SPRINGS, FL 33067	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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