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(Re	equestor's Name)
(Ad	dress)
(Ad	Idress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Canada Instructions to	Filler Officer
Special Instructions to	Filing Officer.
	J. HORNE NUV - 4 2021
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Office Use Only



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COVER LETTER

Registration Section

TO:

Division of Cor	porations .	•	5 · · · •
USA Note SUBJECT:	Pariners LLC	•	• • • • • • • • • • • • • • • • • • •
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	James Mendel		
	-	Name of Person	
	USA Note Partners LLC		
		Firm/Company	
	951 Brickell Avenue, Unit	3505	
	1.00	Address	
	Miami, FL 33131		
		City/State and Zip Code	
	elswoodcapital@gmail.com		
		to be used for future annual repor	t notification)
For further information c	oncerning this matter, please c	all:	
James Mendel		561 337058 at ()	5
Name o	f Person		aytime Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed	■ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclose
Mailing Addres		Street Addre	
Registration S Division of C		Registration Division of	n Section Corporations
P.O. Box 632	•		of Tallahassee
Tallahassee, l	FL 32314	2415 N. Mo	onroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIL ED 2021 OCT 25 PM 8: 50

(Fú

SECRETARY OF STAT TALLAHASSEELES

USA Note Partners LLC

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

	ere filed on <u>9/21/20</u> 2	<u> </u>	and assigned
Florida document number 1.21000417713			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabilit	y company here:		
Elswood Capital LLC			
The new name must be distinguishable and contain the words "Limited Liability	Company," the designa	ition "LLC" or the ab	previation "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 addagent and/or the new registered office address here: Name of New Registered Agent:	dress on our record	ls, <u>enter the nam</u>	of the new registered
			
New Registered Office Address:	Enter Florida st	reet address	
	Cin	, Florida	Zip Code
	•		
New Registered Agent's Signature, if changing Registered Agent:			

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
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ctive date, if other than the effective date is listed, the date muse: If the date inserted in this blument's effective date on the D	ock does not meet the applicat	date of filing or more than 90 ble statutory filing requiren	(optional) days after filing.) Pursuant to 605.020 nents, this date will not be listed a
ord specifies a delayed effective filed.	e date, but not an effective tim	e, at 12:01 a.m. on the earl	ier of: (b) The 90th day after the
ed October 18 James Mena	2021		
Oamaa Waxa	lel	-	
Jurious Trusius			

Filing Fee: \$25.00