

MI00000001591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

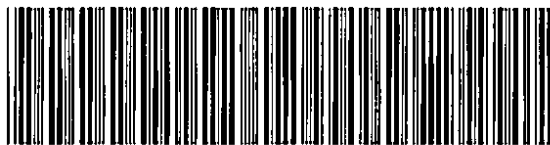
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000420343890

2023 DEC 14 AM 10:40

FILED

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2023 DEC 14 AM 11:27

RECEIVED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 15, 2023

CORPORATION SERVICE COMPANY

RESUBMIT
Please give original
submission date as file date.

SUBJECT: ALVAREZ & MARSAL FINANCIAL INDUSTRY ADVISORY
SERVICES, LLC
Ref. Number: M10000001591

We have received your document for ALVAREZ & MARSAL FINANCIAL
INDUSTRY ADVISORY SERVICES, LLC and the authorization to debit your
account in the amount of \$25.00. However, the document has not been filed and
is being returned for the following:

The last page of the amendment is missing.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by
one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or
your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call
(850) 245-6000.

RUSSELL L HUNT
Regulatory Specialist III

Letter Number: 123A00028634

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STATE OF FLORIDA
TALLAHASSEE

2023 DEC 21 PM 3:48

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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 194434 5155750
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

ORDER DATE : December 13, 2023
ORDER TIME : 9:04 AM
ORDER NO. : 194434-025
CUSTOMER NO: 5155750

FILED
2023 DEC 14 AM 10:40

FOREIGN FILINGS

NAME: ALVAREZ & MARSAL FINANCIAL
INDUSTRY ADVISORY SERVICES,
LLC

CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALVAREZ & MARSAL FINANCIAL INDUSTRY ADVISORY SERVICES, 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:

Brie E. Cuffe
Name of Person

Alvarez & Marsal
Firm/Company

600 Madison Avenue - 8th Floor
Address

New York, New York 10022
City/State and Zip Code

bcuffe@alvarezandmarsal.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brie E. Cuffe at (212) 763-9896
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

CR2E055 (9/15)

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANACT
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: ALVAREZ & MARSAL FINANCIAL INDUSTRY ADVISORY SERVICES, 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)

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2. The Florida document number of this limited liability company is: M10000001591

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: April 7, 2010

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

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

ALVAREZ & MARSAL FINANCIAL SERVICES INDUSTRY GROUP, 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:

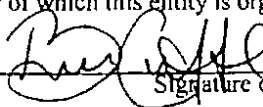
8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Manager	Mark D. Alvarez	600 Madison Avenue - 8t Floor	<input checked="" type="checkbox"/> Add
		New York, New York 10022	<input type="checkbox"/> Remove
Manager	Thomas L. Elsenbrook	700 Louisiana Street - Suite 3300	<input checked="" type="checkbox"/> Add
		Houston, TX 77002	<input type="checkbox"/> Remove
Manager	Michael Spellacy	1 Pickwick Plaza - 3rd Floor	<input checked="" type="checkbox"/> Add
		Greenwich, CT 06830	<input type="checkbox"/> Remove
Manager	Antonio C. Alvarez - remove		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
Manager	Bryan P. Marsal - remove	Samuel Golden - remove	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove

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FILED

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

Brie E. Cuffe, Authorized Signatory

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "ALVAREZ & MARSAL FINANCIAL INDUSTRY ADVISORY SERVICES, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "ALVAREZ & MARSAL FINANCIAL SERVICES INDUSTRY GROUP, LLC" ON THE TWENTY-SECOND DAY OF NOVEMBER, A.D. 2023, AT 2:59 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



4528945 8320
SR# 20234214783

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 204805474
Date: 12-13-23