

m110000003231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

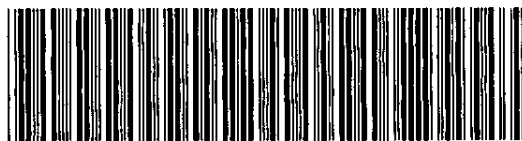
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JUN 17 AM 8:30
TALLAHASSEE, FLORIDA

JUN 18 2015

S MASON

ORION STATE LICENSING, INC.

June 11, 2015

VIA OVERNIGHT DELIVERY

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: KeyMed Data Services LLC (F/K/A) Millennium Collections, LLC
Foreign LLC Amendment to Certificate of Authority

Dear Sir or Madam:

Enclosed please find herewith for filing, the following items on behalf of the above-referenced entity:

1. Company check #12024 in the amount of \$25.00
2. Foreign LLC Amendment to Certificate of Authority Application
3. Certificate of Existence /Articles of Amendment

Thank you for your assistance in this matter. If you have any questions or require further information in order to process this request, please do not hesitate to contact me at (888) 315-0805 or via email janet@orionlicensing.com.

Very truly yours,
ORION STATE LICENSING, INC.

Janet J. Lopez
CEO

Enclosures
JL:cp061115

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUN 17 AM 8:30

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Tel (888) 315-0805 Fax (888) 315-0806 email JANET@ORIONLICENSING.COM
30021 TOMAS STREET, SUITE 300, RANCHO SANTA MARGARITA, CALIFORNIA 92688

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Millennia Collections, 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:

Samara Keaton

Name of Person

KeyMed Data Services LLC

Firm/Company

1121 Situs Court, Suite 285

Address

Raleigh, NC 27606

City/State and Zip Code

Samara@keymeddataservices.com

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

For further information concerning this matter, please call:

Janet Lopez

Name of Person

at (888) 315-0805

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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 (12/14)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
15 JUN 17 AM 8:30

**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)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Millennia Collections, LLC

2. The Florida document number of this limited liability company is: M11000003231

3. Jurisdiction of its organization: Georgia

4. Date authorized to do business in Florida: 06/23/2011

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

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

_____, **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

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TALLAHASSEE, FLORIDA

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>
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove

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
Samara Keaton

Typed or printed name of signee

Filing Fee: \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JUN 17 AM 8:30
TALLAHASSEE, FLORIDA

STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CONTROL NUMBER : 09017778
DATE INC/AUTH/FILED : March 11, 2009
JURISDICTION : Georgia
PRINT DATE : May 18, 2015

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

KeyMed Data Services LLC
A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



B. P. Kemp

Brian P. Kemp
Secretary of State

STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CONTROL NUMBER : 09017778
DATE INC/AUTH/FILED: : March 11, 2009
JURISDICTION : Georgia
PRINT DATE : 05/18/2015

Janet Lopez
30021 Tomas Street, Suite 300
Rancho Santa Margarita, CA 92688

CERTIFIED COPY

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that the attached documents are true and correct copies of documents maintained by the Corporations Division of the Office of the Secretary of State of Georgia under the name of

KeyMed Data Services LLC
A Domestic Limited Liability Company

Said entity was formed in the jurisdiction set forth above and has filed in the Office of Secretary of State on the 11th day of March, 2009 its certificate of limited partnership, articles of incorporation, articles of association, articles of organization or application for certificate of authority to transact business in Georgia. This Certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated herein.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on 05/18/2015



B: P. Kemp

Brian P. Kemp
Secretary of State

Tracking #: WeMwywFv



Brian P. Kemp
Secretary Of State

Office Of The Secretary Of State
Corporations Division

Articles Of Amendment
To Articles of Organization

Article One

The Name Of The Limited Liability Company Is:

MILLENNIA COLLECTIONS, LLC

Article Two

The Date The Articles Of Organization Were Filed Was:

03/11/2009

Article Three

The Limited Liability Company Hereby Adopts The Following Amendment To Change The Name
Of The Organization. The New Name Of The Organization Is:

KeyMed Data Services LLC

IN WITNESS WHEREOF, the undersigned has executed these Articles Of Amendment

On

4/1/2015
(Date)

 Member
(Signature And Capacity in which signing)

Form CD 110

REC'D APR 14 2015