L02000026833

| (Requestor's Name) |
|---|
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S. FTV NOTE.

COVER LETTER

TO:

Registration Section

| Division of Cor | porations | | | | |
|---|--|---|--|--|--|
| FIRST CIT | Y FUNDING GROUP, LLC | • | | | |
| SUBJECT: | Name of Limited Liability Company | | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | | | |
| | ondence concerning this matter | • | | | |
| rease return an correspe | maciee concerning this matter | to the following. | | | |
| | Roy R. Lustig, Esq | | | | |
| | | Name of Person | | | |
| | Roy R. Lustig, P.A. | | | | |
| | | Firm/Company | | | |
| | 20900 NE 30th Avenue, S | uite 600 | | | |
| | | Address | | | |
| | Aventura, Fl 33180 | | | | |
| | | City/State and Zip Code | | | |
| | Roy@RLustig-law.com | to be used for future annual report not | , | | |
| For further information c | oncerning this matter, please c | | incation) | | |
| Roy R. Lustig, Esq | | 305 371-4213 | | | |
| Name o | f Person | Area Code Daytin | ne Telephone Number | | |
| Enclosed is a check for the | ne 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 Addres | | Street Address: | action | | |
| Registration Section Division of Corporations | | Registration Section Division of Corporations | | | |
| P.O. Box 6327 | | The Centre of | The Centre of Tallahassee | | |
| Tallahassee, FL 32314 | | 2415 N. Monroe Street, Suite 810 | | | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| FIRST CITY FUNDING GROUP, LCC. (Name of the Limited Liabil (A Florid | lity Company as la Limited Liabil | it now appears on our rec | cords.) | |
|--|--------------------------------------|-------------------------------|--|--|
| The Articles of Organization for this Limited Liability C Florida document number <u>L02000026833</u> | | | and assigned | |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the lim | nited liability | company here: | | |
| The new name must be distinguishable and contain the words "Lin | nited Liability Co | ompany," the designation " | LLC" or the abbreviation "L.L.C." | |
| Enter new principal offices address, if applicable: | 20 | 900 NE 30th Avenue | 202 | |
| (Principal office address MUST BE A STREET ADDI | RESS) Su | ite 600 | <u> </u> | |
| | | entura, Fl 33180 | | |
| | | | 8 | |
| Enter new mailing address, if applicable: | 20 | 900 NE 30th Avenue | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | ite 600 | | |
| | A۱ | entura, Fl 33180 | 9 | |
| B. If amending the registered agent and/or registere agent and/or the new registered office address here: Name of New Registered Agent: | | ess on our records, <u>en</u> | ter the name of the new registere | |
| New Registered Office Address: 20900 | 0 NE 30th Aver | ue, Suite 600, | | |
| | Enter Floridu street address | | | |
| Aven | | | , Florida <u>33180</u> | |
| New Registered Agent's Signature, if changing Registere | | City | Zip Code | |
| I hamala and the second state of a second state of | t and agree to | act in this capacity. | I further agree to comply with th s, and I am familiar with and | |

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> | Name | Address | Type of Action |
|--------------|------|-------------|----------------|
| | | | □Add |
| | | | □Remove |
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|). If ame | nding any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| (If an effe Note: | re date, if other than the date of filing: |
| he record ord is file | specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed. |
| Dated 1 | May 4 2023 |
| | Signature of a member or appropriated representative of a member |
| | Roy R. Lustig |
| | Typed or printed name of signee |

Filing Fee: \$25.00