

L060000007178

(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



400092244744

03/19/07--01030--018 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
07 MAR 19 PM 2:43

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vertical Lending Services, 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:

M. Ryan Nolen
(Name of Person)
Vertical Lending Services, llc
(Firm/Company)
5684 S. Florida Ave
(Address)
Lakeland, FL 33803
(City/State and Zip Code)

For further information concerning this matter, please call:

M. Ryan Nolen at (863) 299-0082
(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

Vertical Lending Services, LLC

(Present Name)
(A Florida Limited Liability Company)

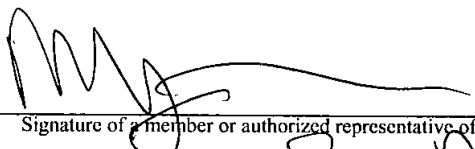
FIRST: The Articles of Organization were filed on 1-20-06 and assigned
document number LO6000007178.

SECOND: This amendment is submitted to amend the following:

To add Silvio Fazzini as a member
of Vertical Lending Services, LLC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
07 MAR 19 PM 2:44

Dated January 21, 2006.


Signature of a member or authorized representative of a member

M. Ryan Noten
Typed or printed name of signee

Filing Fee: \$25.00