L06000021672

(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



000173089250

03/25/10--01022--005 **25.00

SEGRETARY OF STATE ALLAHASSEE, FLORIDA

MAR 25 AM 11: 51

N. C. MAK 2 6 2010

COVER LETTER

TO:

TO: Registration S Division of Co				
SUBJECT:	Ze	erQu LLC		
SUBJECT.		ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
		Helen W. Riddle		
		Name of Person		
		Firm/Company 1713 Concert Rd		
		Address		
		Deltona, FL 32738		
		City/State and Zip Code		
	E-mail address: (connections@cfl.rr.co to be used for future annual repo	ort notification)	
For further information	concerning this matter, please of	eall:		
	len W. Riddle	at (386)	789-4303	
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 en	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Regist	ING ADDRESS: tration Section on of Corporations	Registration	COURIER ADDRESS: a Section Corporations	
P.O. Box 6327		Clifton Buil	lding	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 10 MAR 25 AM II: 54

Matrix Funding	Group LLC	TALI ATE	ASSEE, FLORIDA
(Name of the Limited Liability Compar (A Florida Limited L	<u>ry as it now appear</u> iability Company)	rs on our records.)	ASSEE, FLORIDA.
The Articles of Organization for this Limited Liability Company	were filed on	2/27/2006	and assigned
Florida document numberL06000021672		•	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company her	<u>·e</u> :	
ZerQu l	LC		
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Compa	nny," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		N, A.	
			
Enter new mailing address, if applicable:		N.A.	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		our records, <u>enter t</u>	he пате of the new
Name of New Registered Agent:	N. A	<u> </u>	
Naur Bagistared Office Address			
New Registered Office Address:	En	ter Florida street add	ress
	, Florida		
	City	, 1 1011444	Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre the provisions of all statutes relative to the proper and compl accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	lete performance provided for in C	of my duties, and I o hapter 608, F.S. Or,	im familiar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = I	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	<u> </u>		Add Remove
			Damaya
			The same of the sa
· 		· · · · · · · · · · · · · · · · · · ·	Add Remove
	· ·		
		· · · · · · · · · · · · · · · · · · ·	Remove
D. If amen		enter change(s) here: (Attach additional sheets, if	necessary.)
	/V , /1 ·		FILED 10 MAR 25 AM II: 54 SECRETARY OF STATE ALLAHASSEE, FLORID
Dated	March 22		I: 54 STATE LORIDA
	Melen	A Riddle	
	Signature	e of a member or authorized representative of a member Helen W. Riddle	•
	,	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00