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COVER LETTER

TO: Registration So Division of Cor						
suвjeст: <u>Milstar</u>	G					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspondence	ondence concerning this matter	to the following:				
	James D. Ryan					
		(Name of Person)				
	Ryan & Ryan Attorneys,	P.A.				
		(Firm/Company)				
	631 U.S. Highway One					
		(Address)				
	North Palm Beach, FL 33	3408				
	(City/State and Zip Code)					
For further information of	concerning this matter, please c	all:				
Sue Pfeiffer/James Ry	van	at (561) 841-3420				
(Name	of Person)	(Area Code & Daytime T	'elephone Number)			
Enclosed is a check for the	he following amount:					
2 \$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:

6 12

TO:

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

DIVISION OF CORPOLATION

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Milstar Lending, LLC (Name of the Limited L (A F	lability Company lorida Limited Li	y as it now appears on our r ability Company)	ecords.)	
The Articles of Organization for this Limited Liab Florida document number <u>L07000116004</u>			and assigned	
This amendment is submitted to amend the follow. A. If amending name, enter the new name of t	_	ity company here:		
The new name most be distinguishable and end with "L.L.C."	the words "Limite	ed Liability Company," the de	signation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		10295 Collins Avenue		
(Principal office address MUST BE A STREET ADDRESS)		#1601		
		Bal Harbour, Florida 331	34	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B. B. If amending the registered agent and/or registered agent and/or the new registered office.)	registered offi		ds, enter the name of the new	
Name of New Registered Agent:	Louise Sunshin	0		
New Registered Office Address:	10205 Collins Avenue, #1601			
	· · · · · · · · · · · · · · · · · · ·	(Enter Florid	ia street address)	
	Bal Harbour		Florida 33154	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing Re	gistered Agent:			
I hereby accept the appointment as registered the provisions of all statutes relative to the pro accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this cl	oper and comple ered agent as pr gistered office of	ste performance of my dui rovided for in Chapter 60 addness, I hereby confirm	iles, and I am familiar with and 8, F.S. Or, if this document is	

Page 1 of 2

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 = Manager

MGRM = Managing Member <u>Title</u> Name Address Type of Action MGR Marta Waserstein 9509 Harding Avenue Add 🗆 Surfside, FL 33154 Remove Louise Sunshine MGR 10295 Collins Avenue m Ø Add Bal Harbour, Florida 33154 Remove D Add Remove □ Add ☐ Remove □ Add □ Remove □ Add ☐ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 08 Signature of a member or authorized representative of a member Louise Sunshine

Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00