

L08000068151

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(Address)

(City/State/Zip/Phone #)

☐

(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Tree Side Lending 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:

Richard W. Gross, Esq.  
(Name of Person)

Richard W. Gross, P.A.  
(Firm/Company)

6447 Miami Lakes Drive East  
(Address)

Miami Lakes, Florida 33014  
(City/State and Zip Code)

For further information concerning this matter, please call:

Richard W. Gross, Esq. at ( 305 ) 883-5595  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

FILED  
08 AUG 14 AM 9:09  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Tree Side Lending LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on July 16, 2008 and assigned  
Florida document number L08000068751.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

6447 Miami Lakes Drive East

**(Principal office address MUST BE A STREET ADDRESS)**

Miami Lakes, Florida 33014

**Enter new mailing address, if applicable:**

6447 Miami Lakes Drive East

**(Mailing address MAY BE A POST OFFICE BOX)**

Miami Lakes, Florida 33014

**B. 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:

Richard W. Gross

New Registered Office Address:

6447 Miami Lakes Drive East

*(Enter Florida street address)*

Miami Lakes

*(City)*

Florida 33014

*(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 608, 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)

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

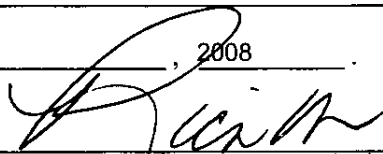
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Richard W. Gross	39 East 6th Street Hialeah, Florida 33014	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Jacqueline Leone	5990 S.W. 129th Terrace Miami, Florida 33156	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary)*

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

FILED  
 08 AUG 14 AM 9:09  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Dated August 11, 2008



Signature of a member or authorized representative of a member

Richard W. Gross

Typed or printed name of signee