L10000118320

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DIVISION OF CERTORATIONS

UL 18 2014 J. HARRIS

COVER LETTER

TO:

Registration Section Division of Corporations

Burke International Marketing Group, 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:

Matthew Burrell

		Name of Person		
	Americom			
	···	Firm/Company		
	33 NE 2ND	St.		
	Address			
	Fort Lauder	dale, FL. 33301		
		City/State and Zip Code		
	mrbusa@winbac	•		
	E-mail address: (to be used for future annual report noti	fication)	
For further information c	oncerning this matter, please c	all:		
Stephen Dr	escher	_{at} 914, 960-8	432	
Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for th	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 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

Burke International Marketing Group, LL		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on November 12,2010	and assigned
Florida document number L10000118320		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
CAB FUNDING,LLC		
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	33 NE 2ND ST	t Sinit
(Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale, FL. 33301	
		8 22 2
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		57
		···
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		he name of the nev
	<u>-</u> -	
Name of New Registered Agent:		
Navy Dagistanad Office Address		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			Add
			□ Remove
			Add
			☐ Remove
			O A REMOVE OF THE PROPERTY OF
			REMOVED STATE REMOVE
			□ Remove
			□ Add
			□ Remove

D. If amending any other information, enter change(s) here: (Attach additional sh	neets, if necessary.)
The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more the date this document is filed by the Florida Department of State)	(optional) than 90 days after
Dated July 17th 2014	
Man	
Signature of a member or authorized representative of a me	ember
Matthew Burrell Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

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