



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000305623 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number: I20010000062 Phone

: (323)962-8600

Fax Number

: (323) 962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SECURE FIDELITY, LLC

Certificate of Status Certified Copy 1 Page Count 03 Estimated Charge \$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO:	Registration S Division of Co					
SUBJE	CT: SECUR	RE FIDELITY, LLC	•			
		(Name of Lin	nited Liability Company)		,	
The enc	osed Articles o	f Amendment and fee(s) are su	bmitted for filing.			
Please re	eturn all corresp	condence concerning this matter	r to the following:			
		Barbara Dang				
			(Name of Person)			
		Legalzoom.com, Inc	:. (Firm/Company)			
		100 W. Broadway S			ಲಾ <u>ದಿ</u> ಚ್ಚ	
		_	(Address)		2011 DEC 30	par ec. se
	Glendale, CA 91210			\\ \tag{\frac{1}{2}}		es raya
			(City/State and Zip Code)	(3 ± (3 ± (3 ± (3 ± (3 ± (3 ± (3 ± (3 ±	30 30	į
For furth	er information	concerning this matter, please of	call:	م رياند نياند		Ass.
Barba	ra Dang (Name	of Person)	at (323) 962-8600 (Area Code & Daytime	Telephone Number) 15		™.,_ r
Enclosed	l is a check for t	the following amount:				•
\$2 5.0	0 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 Sta Certified Copy (additional copy		

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

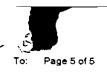
ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECURE FIDELITY, LLC		
(<u>Name of the Limited Li</u> (A F	inbility Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liab	oility Company were filed on 01/04/2011	and assigned
Florida document number <u>L11000001029</u>	•	SE SE
This amendment is submitted to amend the follow	ring:	2011 DEC 30 SECRETARY BALLARASSI
L. If amending name, <u>enter the new name of the second in </u>	he limited liability company here:	
he new name must be distinguishable and end with t L.L.C."	he words "Limited Liability Company," the designation	
3. If amending the registered agent and/or egistered agent and/or the new registered offic	registered office address on our records, ente ee address here:	r the name of the new
Name of New Registered Agent:		
New Registered Office Address:		·
	(Enter Florida street	address)
	(City), Florida	(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)



MGR = Manager

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:

MGRM = Managing Member Type of Action Name Title <u>Address</u> ☐ Add **MGRM** TOSCO, DOMINADOR DIL 1493 STARGAZER TERRACE Remove SANFORD FL 32771 US Dominador D Tosco II MGRM ✓ Add 109 Ambersweet Way, Suite 311 Davenport, FL 33897 Remove Remove Add⊇ Remov E Add 3 ∠[Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Article II - The street address of the principal office of the Limited Liability Company shall be:

Dated 12/26 . 2011 . Signature of a member or authorized representative of a member Dominador D Tosco II

Typed or printed name of signee

109 Ambersweet Way, Suite 311, Davenport, FL 33897
The mailing address of the Limited Liability Company is:

109 Ambersweet Way, Suite 311, Davenport, FL 33897

Page 2 of 2

Filing Fee: \$25.00