## L11000007039

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AUG 24 2023

## **COVER LETTER**

TO: Registration S Division of Co		•			
	COVERY HOLDINGS, LLC				
SUBJECT:	Name of Lin	nited Liability Company	<del></del>		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return ail correspondent	ondence concerning this matter	to the following:			
	WILLIAM HENRY				
		Name of Person			
	FIRST RECOVERY HOL	DINGS, LLC			
		Firn/Company	<del></del>		
	300 SE 2ND STREET, SU	JITE 600			
		Address			
	FORT LAUDERDALE, F	TL 33301			
	WHENRY9434@AOL.CO	City/State and Zip Code			
	E-mail address: (	to be used for future annual report not	ification)		
For further information of	concerning this matter, please c	all:			
WILLIAM HENRY		813 466-2701			
Name c	of Person		ne Telephone Number		
Enclosed is a check for t	he following amount:		·		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fec & 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 Addres		<u>Street Address:</u> Registration Se	ection		
Registration Section Division of Corporations		Division of Co			
P.O. Box 632		The Centre of	The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monro	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FIRST DEBT RECOVERY, LLC			
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number L11000007039	were filed on 01/1	8/2011 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	oility company her	<u>e</u> :	
FIRST RECOVERY HOLDINGS, LLC			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the des	ignation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRESS)		201	
		ن ن	
		1 1	
Enter new mailing address, if applicable:	N/A		
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>	
		<u>්ර</u> 	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:			
	Enter Florida street address		
<del></del>	City	, Florida Ziv Code	
New Registered Agent's Signature, if changing Registered Agent	•	np Code	
I hereby accept the appointment as registered agent and ago provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	- rec to act in this co performance of n provided for in Ch	y duties, and I am familiar with and apter 605, F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			Remove
			□Change
			□Add
			□ Remove
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□ Remove
			□ Change
			□Add
		<del> </del>	Remove
			Change

N/A				
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ective date, if other than the affective date is listed, the date must	date of filing:	a data of tiling or more than	(optional)	605 0207
te: If the date inserted in this blo	ock does not meet the applica	ble statutory filing requir	ements, this date will not be	listed as
rument's effective date on the De	partment of State's records.			
cord specifies a delayed effective	date but not an effective tir	na at 12:01 am an tholo	arlier of (b). The 90th day	aftar tha
s filed.	tate, but not an effective th	ne, at 12,01 a.m. on the c	artier of: (b) The 90th day.	aner me
. NN 1 -	2022			
ed APRIL 15				
( ).11	Signature of a member of author			
will	Signature of a member or autho			_
	Signature of a membed or autho	rized representative of a mer	nber	
WILLIAM HENRY	Signature of a membe <b>d</b> or autho	rized representative of a mer	nber	