L110000045896

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COVER LETTER

TO: **Registration Section Division of Corporations**

Florida Funding 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:

Michael Currie

Name of Person

Florida Funding Group, LLC

3832-10 Baymeadows Rd, #131

Jacksonville, FL 32217

City/State and Zip Code

mike@floridafundinggroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Currie

at (904) 236-5144

Area Code & Daytime Telephone Number

Name of Person

Enclosed is a check for the 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 **ARTICLES OF ORGANIZATION OF**



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Florida Funding Group, LLC		
(Name of the Limited Liability Compa) (A Florida Limited I	ny as it now appears on our record liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Company Florida document number L11000045896	were filed on April 15, 2011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ited Liability Company," the designa	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable:	644 Cesery Blvd	
(Principal office address MUST BE A STREET ADDRESS)	Suite 330	
	Jacksonville, FL 32211	
Enter new mailing address, if applicable:	3832-10 Baymeadows R	<u>d</u>
(Mailing address MAY BE A POST OFFICE BOX)	Suite 131	
	Jacksonville, FL 32217	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>.</u>	

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Global Funding Services, LLC	10175 Fortune Parkway	Add
		Suite 1003	Remove
		Jacksonville, FL 32256	
MGRM Michael Currie	Michael Currie	3832-10 Baymeadows Rd	Add
		Suite 131	Remove
		Jacksonville, FL 32217	
MGRM Diversified Capital Services, Inc	Diversified Capital Services, Inc	36181 East Lake Rd	Add
		Suite 300	Remove
		Palm Harbor, FL 34685	
		Add	
		Remove	
MGR Michael Currie	Michael Currie	3832-10 Baymeadows Rd	[✓] _{Add}
	 	Suite 131	Remove
		Jacksonville, FL 32217	Kemove
			DIVERNITE TO THE STATE OF CONTROL OF CONTROL OF STATE OF CONTROL OF STATE OF CONTROL OF STATE OF CONTROL OF STATE OF CONTROL OF CONT

D. If amending any other	information, enter change(s) here: (Attach additional sheets, if necessary.)
	•
	
December 1	2012
	Macan
	Signature of a member or authorized representative of a member
Michael (Currie

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

DIMETON OF CORPORATION

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