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J. SAULSBERRY EXAMINER AUG 21 2013

COVER LETTER

TO:	Registration Sec Division of Corp			•				
SUBJI	ECT:	Easy	Funding	ue				
**			Name of Limited	Liability Company				
The en	closed Articles of A	Amendment an	d fee(s) are submi	tted for filing.				
Please	return all correspor	ndence concerr	ing this matter to	the following:				
			Felix	cepeda				
				Name of Person				
				Firm/Company		S.	2013 AUS 19	777
		<u></u>		Address		발 프	Ā	HT- SHAP
				City/State and Zip Code	32	<u> </u>	<u>၄</u> 5 5	•
			easy func E-mail address: (to b	ling IIC hotmail. Go used for future annual report notifica	tion)		ഗ	
For fu	rther information co	oncerning this	matter, please call	:				
i	Felix Cepe	da		at (784) 426. 50	90			
	Name of	Person		Area Code & Daytime T	elephone Number			
Enclos	sed is a check for th	e following an	nount:					
52 \$2:	5.00 Filing Fee	□\$30.00 Fi. Certific	ling Fee & ate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Certificate of Certified Conditional of Cadditional of Certified Conditional of Cadditional of Certified Conditional Of Certified C	of Sta	atus &	osed)
	MAILI	NG ADDRES	S:	STREET/COURIE	R ADDRESS:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

tersy funding		
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on 16/27/20	and assigned
Tiorida document number		
This amendment is submitted to amend the following:		2 81
A. If amending name, enter the new name of the limited liabil	ity company here:	3 AUG
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:		27 0
(Principal office address MUST BE A STREET ADDRESS)		5 3
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Eusy Funding 1 13876 5W 56 St Minni, FL 3317	
B. If amending the registered agent and/or registered office address here	ce address on our records, ente	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	ıddress
	, 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 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 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

ļ

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Steve Mena	13876 SW SU ST SUIK 30	
		Migmi, FL 33175	Remove
			Add
			Remove
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		20 yr	Remove
 		VGINU USE STATE THE STATE OF S	Add Add Remove
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If an	rendin	g any other inf	ormation, enter change(s) here: (Attach additional sheets, if necessary.)
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		···	
ed	15	Aggust	, 2013
		4 5	Falex Capale
	_		Signature of a member or authorized representative of a member
			Felix Cepeda
			Typed or printed name of signee
			B 3 63

Page 3 of 3

Filing Fee: \$25.00