

12/27/203

03:03

P.001/004

L13000023210

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
THE FUNDING TREE, LLC**

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B. BOSTICK

FEB 17 2014

12/27/2031 03:03
FEB/14/2014/FRI 11:26 AM
12/27/2031 01:00

FAX No.

#6755 P.002/004
P.002/004
#6737 P.001/004

H14000037144
ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

THE FUNDING TREE LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 2/13/13 and assigned
Florida document number 13000023210

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new
registered agent and/or the new registered office address here:

Name of New Registered Agent:

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

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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:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
Co-Manager	GEORGE SCHMIDT	11900 ASHFORD LN	☒ Add
	Schmidt	DAVIE, FL 33325	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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#8797 P.003/004

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated _____

2/14/2014
X Orlando Alvarez

Signature of a member or authorized representative of a member

ORLANDO ALVAREZ

Typed or printed name of signee

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