

4/2/2015 16:28:39 From: To: 8506176383

(1/6)

Division of Corporations

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C17000092789

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

****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
FL - PTH 9, LLC

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FL - PTH 9, 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:

Benita Faizy

Name of Person

Tax Ease

Firm/Company

14901 Quorum Drive, Suite 900

Address

Dallas, TX 75254

City/State and Zip Code

Benita.Faizy@taxease.com

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

For further information concerning this matter, please call:

Benita Faizy

Name of Person

214

at (_____) _____

Area Code

420-5948

Daytime Telephone Number

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
TO
ARTICLES OF ORGANIZATION
OF**

FL - PTH 9, 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 06/27/2013 and assigned
Florida document number L13000092789.

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 offices 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

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 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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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		_____	<input type="checkbox"/> Remove

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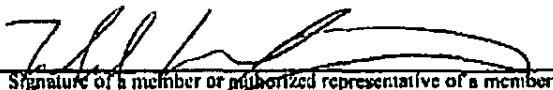
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please see Attachment

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 1 , 2015


Signature of a member or authorized representative of a member

Tax Ease Funding Two, LLC, member, By: Mark Shapiro

Typed or printed name of signer

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Filing Fee: \$25.00

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ATTACHMENT
TP ARTICLES OF AMENDMENT
ARTICLES OF ORGANIZATION
OF
FL - PTH 9, LLC

a Florida limited liability company

This attachment is made to the Articles of Organization of FL - PTH 9, LLC (the "Company") to amend the Articles of Organization as follows:

FIRST: The certificate of formation of the company is hereby amended by replacing the reference to "the Company has not and shall not, so long as there is any effective UCC-1 financing statement filed in Florida naming the Company as Debotor and CONA as Secured Party" in Article VIII with the following:

"The Company has not and shall not, so long as there is any effective UCC-1 financing statement filed in Florida naming the Company as Debotor and CONA as Secured Party do any of the following without the written consent of CONA:"

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