## L14000 190411

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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> SECRETARY OF STATE FALLAHASSEE, FLORIDA

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## **COVER LETTER**

	gistration Sect vision of Corp			•
eur ipær.	Sell Struc	tured Settlement, LLC		
SUBJECT:		Name of Limit	ed Liability Company	
The enclose	d Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return	n all correspon	dence concerning this matter to	o the following:	
		Steven D. Mackey		
			Name of Person	
			Firm/Company	
		4911 Glenn Pine Lar	ne	
			Address	
		Boynton Beach, Flor	ida 33436	
			City/State and Zip Code	<del></del>
		lmjackson1418@gma		·
			o be used for future annual report notificat	10 <b>n</b> )
For further	information co	ncerning this matter, please ca	11:	
Steven [	D. Mackey		561 738-7576	
	Name of	Person	Area Code Daytime Te	lephone Number
Enclosed is	a check for the	e 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

Sell Structured Settlement, LLC

New Registered Agent's Signature, if changing Registered Agent:

company has been notified in writing of this change.

(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on ou d Liability Company)	r records.)	<del></del>
The Articles of Organization for this Limited Liability Compar Florida document number H14000287725 LIGOO	ny were filed on Decem	ber 12, 2014	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ability company here:		
Sell My Structured Settlement, LLC			
he new name must be distinguishable and end with the words "Limited Li	ability Company," the designa	tion "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)		Ās	. 20
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nter new mailing address, if applicable:		<u> </u>	- 1 t 2
Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·		ယ္
		98 TA	
		20	9
. If amending the registered agent and/or registered egistered agent and/or the new registered office address he		records, <u>enter th</u>	e name of the
Name of New Registered Agent:	<del></del>		
New Registered Office Address:			
	Enter Florida stre	et address	
		, Florida	
	City		Zip Code

If Changing Registered Agent, Signature of New 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

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

<u>Title</u>	<u>Name</u>	Address	Type of Action
	<del></del>		Add
			Remove
			□ Add
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ective date, if other than the date o	of filing: (optional) ior to date of receipt or filed date and cannot be more than 90 days after
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Page 3 of 3

Filing Fee: \$25.00

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