## L1500056530

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## **COVER LETTER**

	ision of Cor						
SUBJECT:	FIDELIS PAYMENTS, LLC						
oobject.	Name of Limited Liability Company						
The enclosed	d Articles of .	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		KEVIN T. VAGOVIC, ES	Q.				
			Name of Person				
	KEVIN T. VAGOVIC, P.A.						
			Firm/Company				
	210 S. BEACH STREET, SUITE 203						
			Address				
	DAYTONA BEACH, FLORIDA 32114						
			City/State and Zip Code				
		KEVIN@VAGOVICLAW.					
		E-mail address: (1	to be used for future annual report notif	ication)			
For further in	nformation co	oncerning this matter, please ca	all:				
KEVIN T. VAGOVIC, ESQ.			386 265-0900 at ()				
	Name of	Person	Area Code Daytime	Telephone Number			
Enclosed is a	check for th	e following amount:					
■ \$25.00 F	iling 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

FIDELIS PAYMENTS, LLC				·	
( <u>Name of the Limi</u>	ted Liability Compa (A Florida Limited l	ny as it now appears on c Liability Company)	our records.)		
The Articles of Organization for this Limited L Florida document number L15000056520	iability Company	were filed on MARCI	H 12, 2015	and assigned	
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name of	f the limited liab	ility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the design:	ation "LLC" or the abbr	eviation "L.L.C."	
·		1675 COMMERCE PARK DRIVE, SUITE 4			
Enter new principal offices address, if applie		DELAND, FLORIDA 32720			
(Principal office address MUST BE A STREET ADDRI		DELAND, I LONIO	1 32720		
Enter new mailing address, if applicable:		1675 COMMERCE	ERCE PARK DRIVE, SUITE 4		
(Mailing address MAY BE A POST OFFICE	ROX)	DELAND, FLORIDA 32720			
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:			records, enter th	ne name of the new	
New Registered Office Address:	210 S. BEACH	STREET, SUITE 203			
New Registered Office Address.	Enter Florida street address				
	DAYTONA BI	EACH	, Florida		
	City		Zip Code		
New Registered Agent's Signature, if changing	Registered Agent:	•			
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete istered agent as p registered office change.	performance of my oprovided for in Chap	duties, and I am fai ter 605, F.S. Or, if onfirm that the limit LAHETAR	niliar with and this document is ted liability	

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member **Address Type of Action Title** <u>Name</u> □ Add ☐ Remove ☐ Change \_□ Add ☐ Remove ☐ Change \_□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change \_□ Add ☐ Remove Change Ä \_\_☐ Change

D. 'If amend	ling any other inf	formation, enter c	hange(s) here: (	Attach additional shee	ts, if necessary	<i>).</i> )	
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(If an effection Note: If t	ve date is listed, the d the date inserted in	an the date of filing ate must be specific and this block does not re the Department of S	d cannot be prior to da neet the applicable	ate of filing or more than 90 statutory filing requirer	(optional) days after filing. nents, this date	) Pursuant to 605.0 will not be listed	207 (3)(b as the
If the record (b) The 90	d specifies a de Oth day after th	layed effective of e record is filed.	late, but not ar	n effective time, at	12:01 a.m.	on the earlier	of:
Dated	Janua	ny 14 on Volan	2016		æ		
	JOVINO VELAZ		member or authorize	d representative of a memb	38		
			Typed or printed na	me of signee	(17.22	T T	
			Page 3 o	of 3		ي س	
			Filing Fee:	\$25.00	J.W.	듄	