## L15000120174

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(5
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 1 ming officer.





600293482286

01/20/17--01009--001 \*\*25.00

MIT JAN 20 P 3: 57

D. BRUCE JAN 23 2017

## **COVER LETTER**

Division of Corporations	
SUBJECT: Maximum Business Lending, 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:	
George Carter Name of Person	
Name of Person	
NIA	
Firm/Company	
8875 Hidden River Pkwy, Ste. 300	
Temple Terrace, FL 33637 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
For further information concerning this matter, please call:    George Carter   at (813) 391-0420   State     Name of Person   Area Code   Daytime Telephone Number   State     Name of Person   Carter   State   Stat	
Enclosed is a check for the following amount:	iTT
\$25.00 Filing Fee \$\times \text{S55.00 Filing Fee & Certificate of Status}\$\$ \text{Certified Copy (additional copy is enclosed)}\$\$ \$\text{Certified Copy (additional copy is enclosed)}\$\$	ָ ט

·TO:

Registration Section

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

(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 Liabili	ty Company were filed on 07/13/2015 and assigned
Florida document number 1,5000 120	•
This amendment is submitted to amend the following	⊼ <sub>0</sub> ~
A. If amending name, enter the new name of the	limited liability company here:
Coplous Capital GRI	Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
The new name must be distinguishable and contain the words '	"Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	DDRESS) Suite 300 5 5
(Principal office address MUST BE A STREET AI	DDRESS) Suite 300 \$ 5
	Temple Texasce, FL 33637
Enter new mailing address, if applicable:	P.O. BOX 46964
(Mailing address MAY BE A POST OFFICE BOX	
B. If amending the registered agent and/or registered agent and/or the new registered office	egistered office address on our records, <u>enter the name of the new</u> address here:
Name of New Registered Agent:	Michele Harris-Carter
New Registered Office Address:	8875 Hidden River PKwy, Stc. 300 Enter Florida street address
_	Temple Terrace, Florida 33637  City Zip Code
New Registered Agent's Signature, if changing Regis	tered 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

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 Title Name Address **Type of Action** George Carter 13023 Terrace Springs De Add Temple Teppace, FL 38637 Dremove Change ·P Michele Harris-Carter 8875 Hidden River Pkuy Wadd Ste. 300 Remove Temple Texace, FL 33637 Change ☐ Add ☐ Remove ☐ Change □ Add <u> F⇔</u> □ **Re**move \_ □ Ehange □ Remove ☐ Change ☐ Remove

☐ Change

				<del></del> -
· · · · · · · · · · · · · · · · · · ·				
				···-
		<del></del>	<del> </del>	<del></del>
		<del></del>		
				<del> </del>
		<del></del>		
		<del> </del>		
				· · · · · · · · · · · · · · · · · · ·
ffective date, if other than the date is listed, the date in ote: If the date inserted in this	block does not meet the ap	pplicable statutory filing i	(optional) e than 90 days after filing.) F requirements, this date w	Pursuant to 605.0207 (3 ill not be listed as th
ocument's effective date on the			ne at 12:01 a.m. o	n the earlier of:
e record specifies a delay		t not an effective tir	ne, at 12.01 a.m. o.	₹
e record specifies a delay The 90th day after the re	ecord is filed.	t not an effective tir	ne, at 12.01 a.m. o.	₹
e record specifies a delay		t not an effective tir	ne, at 12.01 s.m. o.	₹
e record specifies a delay The 90th day after the re	ecord is filed.	t not an effective tir	ne, at 12.01 s.m. o.	2017 JAN SECRET TALLAHA
e record specifies a delay The 90th day after the re	ecord is filed.	t not an effective tin		2017 JA SECRE TALLAH

Page 3 of 3

Filing Fee: \$25.00