## 215000 158 183

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





800315782818

07/16/18--01025--014 \*\*25.00

18 JUL 16 PM 2: 30

N COOPER JUL 23 2018

## **COVER LETTER**

SURJECT: EASY 1	LOAN SERVICES	, LLC	
	Name of Limi	ted Liability Company	
The enclosed Articles of Am	endment and fee(s) are subr	nitted for filing.	
Please return all corresponde	ence concerning this matter t	to the following:	
	Thomas	Ahmar Name of Person	
		Name of Person	<del></del>
		LHHHH.	
•	<del></del>	Firm Company	
	13100 B	saigne Blud Address	
-		Address	
	North M	iami Fl 33181	
		City/State and Zip Code	
_	y honny o	ahrneir (a) yahoo. Cor o be used for future annual repor	γ <b>1</b>
	E-māfi address: (to	o be used for future annual repor	t notification)
For further information conce	erning this matter, please ca	11:	
Thonny	Ahmar	m 305 1 744	1.6832
Name of Pe	rson	Area Code Da	1.6832 aytime Telephone Number
Enclosed is a check for the fo	ollowing 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

TO:

Registration Section Division of Corporations

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EASY LOAN SE	RVICES LLC	
(Name of the Limited (/	RVICES LLC Liability Company as it now appears on our records. Florida Limited Liability Company)	.)
The Articles of Organization for this Limited Lia	oility Company were filed on 50nbiz	and assigned
Florida document number <u>L 1500015818</u>	3	
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of t	he limited liability company here:	
A\ u		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:	
Principal office address MUST BE A STREET	ADDRESS)	<del></del>
		Wise Section
Enter new mailing address, if applicable:		6 rAR
Mailing address MAY BE A POST OFFICE B	<u> </u>	PR 2:
		30
B. If amending the registered agent and/or registered agent and/or the new registered offi		enter the name of the ne
Name of New Registered Agent:	Jlonny Ahmar	
New Registered Office Address:	13100 Biscaure Blud	
	tinat timum sireti adaress	
	North Hiami Flo	rida 33181
	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

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

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			_ 🗖 Change
			☐ Remove
			Change
			Add
			Remove
			□ Change
			Add
			Remove
			□ Change
	<del></del>	<del></del>	
			Remove
			Change
			Add
			Remove

\_\_\_\_\_ Change

	•			<u></u> .						
								<u>.                                    </u>		
	<del></del>	·								
		<del></del>	<del></del> -							
					<del></del>	<del></del>				
						·				
						-				
			_							
						_			<u></u>	Q.V
	_								<b>18</b> 년	0151
							-		1 JUL   16	07
	<del></del>	<del></del>			<u> </u>				<u> </u>	CUNI
							- <u>-</u>		− <i>i</i> ;	9
									30	3.10.1
										;
Effective	date, if oth	er than the	date of fili	ng:			(optic	onal) tiling.) Pursuant		
Note: 11 1	ine date inser	ted in this bl	ock does not	I meet the ap	plicable statut	iling or more the ory filing requ	an 90 days after pirements, this	filing.) Pursuant date will not l	to 605.6 be liste	0207 :d as
document	's effective d	ate on the D	epartment of	'State's reco	rds.					
ne recor	d specifies	a delave	d effective	date, but	not an effe	ective time	at 12:01 a	.m. on the	earlie	er o
The 90	th day aft	er the rec	ord is filed	i.		,				
	JL	12		. 201	eW					
Jarad	<del></del> [	<u>~</u>				N.				
Dated										
Dated		_	Signature of	a marabar ar	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	sentative of a n		<u>_</u>		

Page 3 of 3

Filing Fee: \$25.00