

400291446374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

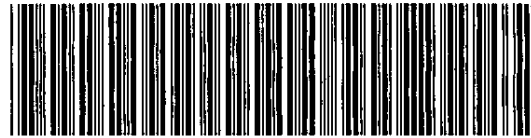
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

NOV 23 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 26, 2016

OLGA PADRON
18245 NW 68 AVE #522
HIALIAH, FL 33015

SUBJECT: REPUBLIC COMMERCIAL FUNDING LLC
Ref. Number: L16000009443

We have received your document for REPUBLIC COMMERCIAL FUNDING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 016A00023004

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Republic Commercial funding, 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:

WALTER ABREU
Name of Person

Republic Commercial funding, LLC
Firm/Company

14750 NW 77th #206
Address

Miami Lakes FL 33014
City/State and Zip Code

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

For further information concerning this matter, please call:

Walter Abreu at 305 849-2646
Name of Person Area Code Daytime Telephone Number

letter dated Oct. 20, 2006.
Enclosed is a ~~check~~ for the following amount: Please see attachment.

- ☒ \$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

Total of 5 pgs
including cover.

Thank you.

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Republic Commercial Funding, 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 1/13/2016 and assigned Florida document number LI000009443

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 contain 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)

14750 NW 77 Ct. #206
Miami Lakes, FL 33014

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

14750 NW 77 Ct. #206
Miami Lakes, FL 33014

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:

Walter Abreu

New Registered Office Address:

14750 NW 77 Ct. #206

Enter Florida street address

Miami Lakes, Florida 33014

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:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	WALTER ABRAU	14750 NW 77th. ^{Miami Lakes FL} 33016	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	Jonathan Romero LARA	7540 SW 107 AVE #5105 miami, FL 33173	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
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16 NOV 23 PM 23
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ATTORNEY GENERAL
TALLAHASSEE, FLORIDA

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

11/1/, 2014.

Jonathan Romero LABA

Typed or printed name of signee