

L16000038308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2017 FEB -9 PM12:00
M. MILLIGAN

M. MILLIGAN

FEB 10 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2017

FIRST TRUST FUNDING GROUP, LLC
ATTN: ANTHONY SCARPO
1601 RENAISSANCE WAY
TAMPA, FL 33602

SUBJECT: FIRST TRUST FUNDING GROUP, LLC
Ref. Number: L16000038308

RECEIVED
2017 FEB -9 AM 11:17
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Upon receipt of your letter and/or check(s) totaling \$35.00, no document was found. Please send your document with any fees due to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

Please note that the attached Form 8822-B is not intended for this office and is returned to you.

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.

Michelle Milligan
Senior Section Administrator

Letter Number: 717A00001808

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FIRST TRUST FUNDING GROUP, 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:

Anthony L. SCARPO
Name of Person

FIRST TRUST FUNDING GROUP, LLC.
Firm/Company

11 San MARCO ST. UNIT 1101
Address

CLEARWATER, FL. 33767
City/State and Zip Code

Tampadiamonds@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anthony SCARPO at (813) 486-6088
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

AL READY
PAID
see ATTACHED
Letter

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

FIRST TRUST FUNDING Group 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 2-23-14 and assigned
Florida document number L16000038308.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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)

1180 Gulf Blvd.
Suite 2201
Clearwater, FL. 33767

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1180 Gulf Blvd.
Suite 2201
Clearwater, FL. 33767

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:

N/A

New Registered Office Address:

Enter Florida street address

Florida

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.

N/A

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>
<u>MGR</u>	<u>Barbara B. Scampo</u>	<u>1180 Gulf Blvd, ste 2201</u>	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		<u>Clearwater, FL 33767</u>	<input checked="" type="checkbox"/> Change
<u>MGR</u>	<u>Danmory C. Scampo</u>	<u>1180 Gulf Blvd, ste 2201</u>	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		<u>Clearwater, FL 33767</u>	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

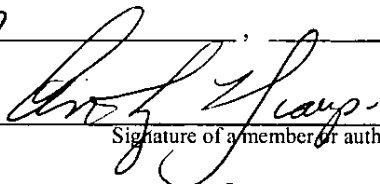
E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated 2-7-17



Signature of a member or authorized representative of a member

Anthony L. Scarpo
Typed or printed name of signee

2017 FEB -9 PM 12:00
RECEIVED
FEB 9 2017
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