LICOCOCS4247

. (Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bi	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



700298974627

06/27/17--01001--012 **25.00

2017 JUN 27 PH 1: 31
SECRETARY OF STATE

K. SALY JUN 29 2017

COVER LETTER

TO:	Registration Se Division of Cor				
CUD IE/		or Client Legal Funding			
SUBJEC	-1; <u></u>	Name of Limited Liability Company			
, The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		Christopher J Hunt			
			Name of Person		
		Safe Harbor Client Legal 1	Funding		
			Firm/Company		
		200 4th Ave S. Apt 112			
			Address	· · · · · · · · · · · · · · · · · · ·	
		St. Petersburg, FL 33701			
			City/State and Zip Code		
		chrishunt@safeharborlegali			
		E-mail address: (to be used for future annual report notifi	cation)	
For furth	ner information o	concerning this matter, please c	all:		
Christop	her Hunt		727 328-4926 at ()		
	Name o	of Person		Telephone Number	
Enclosed	l is a check for t	he following 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)	
	MAII	ING ADDRESS.	STREET/COURT	FD A NNDFCC.	

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2017 JUN 27 PM 1:31
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Safe Harbor Client Legal Funding, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(It i wild Limbox	Examine, company,	~~
The Articles of Organization for this Limited Liability Company Florida document number	were filed on April 28th	2016 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab Safe Harbor Legal Funding, LLC	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	260 1st Ave S Suite 200	9-180 St. Petersburg FL 33701
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	260 1st Ave S Suite 200	0-180 St. Petersburg FL 33701
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:		records, enter the name of the new
New Registered Office Address:		
	Enter Florida stree	et address
	. <u> </u>	, 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.

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: 2017 JUN 27 PM 1:31 MGR = Manager AMBR = Authorized Member SECRETARY OF STATE TALLAHASSEE. FLORIDA <u>Title</u> <u>Name</u> Address **Type of Action** _□ Add □ Remove □ Change □ Add ☐ Remove □ Change □ Add ☐ Remove ☐ Change □ Add □ Remove _□ Change □ Add □ Remove _□ Change □ Add □ Remove

☐ Change

,	2012
	tion, enter change(s) here: (Attach additional sheets, if necessary.)
	TALLAHASSEE, FLOR
	TAHASSEE, FLOR

ffective date, if other than th	June 23rd 2017
an effective date is listed, the date m	st be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
	lock does not meet the applicable statutory filing requirements, this date will not be listed a separtment of State's records.
e record specifies a delaye The 90th day after the re	d effective date, but not an effective time, at $12:01\ a.m.$ on the earlier cord is filed.
June 23rd ated	2017
	7/
/////	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00