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COVER LETTER

	tration Sec ion of Corp				
SUBJECT: _	MR ADVAN	NTA IRA LLC			
SUBJECT: _		Name of Lim	ited Liability Company	·····	
		amendment and fee(s) are sub	_		
		Morris E Rendahl			
			Name of Person		
		MER Advanta LLC			
			Firm/Company		
		708 Rob Roy Place			
			Address		
		Temple Terrace, Florida 3	3617		
		sparky11@ix.netcom.com	City/State and Zip Code		
			to be used for future annual report notifica	ation)	
For further info	ormation co	ncerning this matter, please co	all:		
Jennifer Rend	ahl		813 760-8995 at ()		
	Name of	Person	Area Code Daytime T	elephone Number LC JUN 20	ij
Enclosed is a	heck for the	e following amount:			
□ \$25.00 Fil	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is endlosed)	Ö

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

MR ADVANTA IRA LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L16000107738	were filed on 05/26/2016 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	nility company here:			
MER ADVANTA LLC				
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	708 Rob Roy Place			
Principal office address MUST BE A STREET ADDRESS)	Temple Terrace			
	Florida 33617			
Enter new mailing address, if applicable:	708 Rob Roy Place			
Mailing address MAY BE A POST OFFICE BOX)	Temple Terrace			
	Florida 33617			
3. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	Enter Florida street address			
	City Sip 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Filing Fee: \$25.00