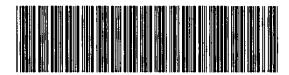
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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO:	Registration Se Division of Cor		÷.	
SUBJE		Lien Search, LLC		
SUBJE	.C1:	Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please i	return all correspo	ndence concerning this matter	to the following:	
		Ricard Carey		
		-	Name of Person	
		Carey Law Group, PA		
			Firm/Company	·
		1801 Indian Rd, Ste 103		report notification)
			Address	
		West Palm Beach, FL 3340)9	
		97-1-2 4	City/State and Zip Code	
		richard@reareylaw.com		
			to be used for future annual report notifi	cation)
For furt	ther information c	oncerning this matter, please ca	all:	
Richard	d Carey		561 2471266 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
□ \$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

First Trust Lien Search, LLC	
(<u>Name of the Limited Liabi</u> (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)
-	Company were filed on 7/12/2016P and assigned
Florida document number L16000131193	<u></u> .
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADD	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office add	istered office address on our records, <u>enter the name of the new</u> dress here:
Name of New Registered Agent:	
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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Austen Bernstein	7741 N Military Trail, Ste 1	Add
		Palm Beach Gardens, FL 33410	Remove
			Change
			🗖 Add
			Remove
			□ Change
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Effective date, if of If an effective date is linguistry. If the date in document's effective.	serted in this block o	loes not meet the	: applicable statu	filing or more than story filing requir	(optional 90 days after filing ements, this date) g.) Pursuant to 605.02 e will not be listed
he record specifi The 90th day			out not an eff	ective time, a	it 12:01 a.m	. on the earlier
Dated 2/11		Qz	. ا ^س ار		,	
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Page 3 of 3

Filing Fee: \$25.00