

(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



700306064497

12/07/17--01012--020 **25.00

2117 020 -7 78 1:55

LECT 8 THINKIE

COVER LETTER

TO: Registration S Division of Co	ection rporations		
fFIRST O	NE FINANCE USA LLC		
SOBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	JULIA G VENUTI		
		Name of Person	
		Firm/Company	
	6456 MILK WAGON LN		
		Address	
	MIAMI LAKES FL 3301-	4	
		City/State and Zip Code	
	JVENUTI@FIRSTONEFIN		
For further information	E-mail address: (concerning this matter, please co	to be used for future annual report notif	leation)
	concerning this matter, prease co	df1:	
JULIA G VENUTI		305 222-7797	
Name o	of Person	at ()	Telephone Number
Enclosed 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)

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 ONE FINANCE USA LLC

ited Liability Compar (A Florida Limited L	ny a <u>s it now appears on ou</u> liability Company)	r records.)	
Liability Company	were filed on <u>07/21/201</u>	6 and assig	ned,
lowing:			
of the limited liabi	ility company here:		
words "Limited Liabil	ity Company," the designati	on "LLC" or the abbreviation "L.L.	C."
cable:		2::	
ET ADDRESS)			<u> </u>
		1	,
	8004 NW 154 STREE	r <u>.</u>	
E BOX)	SUITE 184	-	
	MIAMI LAKES FL 33	016 C S	
office address here	2:	records, <u>enter the name of</u>	f the
JULIA G VEN	UII		
6456 MILK W/		-	_
MIAMI LAKES		, Florida 33014	
	Liability Company Jowing: of the limited liability words "Limited Liability cable: ET ADDRESS) Lor registered of office address here JULIA G. VEN 6456 MILK WA	Liability Company were filed on O7/21/201 lowing: of the limited liability company here: words "Limited Liability Company," the designation of the limited Liability Company," the designation of the limited Liability Company, the designation of the limited Liability Company the limited Liability Company the designation of the limited Liability Company the designation of the limited Liability Company the designation of the limited Liability Company the liability Company the limited Liability Company the liab	words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L. cable: ET ADDRESS) 8004 NW 154 STREET SUITE 184 MIAMI LAKES FL 33016 Company, "the designation "LLC" or the abbreviation "L.L. 8004 NW 154 STREET MIAMI LAKES FL 33016 Company, "the designation "LLC" or the abbreviation "L.L. 8004 NW 154 STREET JULIA G VENUTI 6456 MILK WAGON LN Enter Florida street address MIAMI LAKES Florida 33014

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>	Address	Type of Action
MGR	JULIA G VENUTI	6456 MILK WAGON LN	
		MIAMI LAKES FL 33014	Remove
			Change
			□ Remove
			☐ Change
			Remove
			Change
			☐ Remove
			Change
			□ Add
			□ Rèmove,
			Change
			□'Add
			Remove
			☐ Change

			-
			-
-			-
		-	-
			-
		-	-
			-
			-
			-
			-
		.,	
			-
		 	-
		······································	•
	12/05/2017		
Effective date, it	f other than the date of filing: 12/05/2017 (option listed, the date must be specific and cannot be prior to date of filing or more than 90 days after	onal)	. 0.7.0.7
Note: If the date	inserted in this block does not meet the applicable statutory filing requirements, this ive date on the Department of State's records.	date will not be list	ed as
ne record spec The 90th day	ifies a delayed effective date, but not an effective time, at $12\!:\!01$ a γ after the record is filed.	.m. on the earli	er of
Dated			
	Signature of a member or authorized representative of a member		_
		JEJ	• • • • • • • • • • • • • • • • • • •
	Julia C. Ve Nu Ti Typed or printed name of signee	1	•
	Typed of printed name of signee	-	
	Page 3 of 3	••	
	Page 3 01 3	φ. γ	

Filing Fee: \$25.00