## L17000048399

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## **COVER LETTER**

	Registration So Division of Co		, ,				
eud ie <i>c</i>	First Guara	nty Funding J.L.C	•	a <b>t</b>			
SUBJEC	Name of Limited Liability Company						
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	turn all correspo	ondence concerning this matter	to the following:				
		William O'Donnell					
			Name of Person				
		First Guaranty Funding, L	LC				
			Firm/Company	-			
		1779 South Pinellas Avenu	ie. Suite 100				
			Address				
	Tarpon Springs, FL 34689						
	City/State and Zip Code						
		bodonnell@fgfunding.com					
			to be used for future annual report no	Milication)			
For furth	er information o	concerning this matter, please c	all:				
William	O'Donnell		727 409-6735				
•	Name o	f Person	Area Code Dayt	ime Telephone Number			
Enclosed	is a check for t	he following amount:					
<b>■ \$</b> 25.6	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 Addre		Street Address: Registration S	Section			
	Division of C		Division of Co				

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

First Guaranty Funding, LLC

The Articles of Organization for this Limited Liability Company were filed on  $\frac{03/01/2017}{1}$ 

2019 AUG 17 AM 10: 40

If Changing Registered Agent, Signature of New Registered Agent

\_\_\_\_ and assigned

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

Florida document number L17000048399	······································	
This amendment is submitted to amend the following	g;	
A. If amending name, enter the new name of the	limited liability company here:	
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 AL		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	2	
B. If amending the registered agent and/or registered agent and/or the new registered office address her		enter the name of the new registered
New Registered Office Address:		
tion (togistered Office Fidures).	Enter Florida street	address
		, Florida
	•	Zip Code
New Registered Agent's Signature, if changing Regist	tered Agent:	
I hereby accept the appointment as registered age provisions of all statutes relative to the proper an accept the obligations of my position as registered		

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 2020 AUG 17 #110: 40	Type of Action
AMBR	Alex Groyzburf	3 GRANDVIEW DR	□Add
		HOLMDEL NJ 07733	Remove
			□Change
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ffective date, if other than the can effective date is listed, the date must lote: If the date inserted in this bloocument's effective date on the De	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 ck does not meet the applicable statutory filing requirements, this date will not be listed a
record specifies a delayed effective I is filed.	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated August 13	. 2020
al Do	
	Signature of a member or authorized representative of a member
William O'Donnell	
	Typed or printed name of signee