

L17 000 163726

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

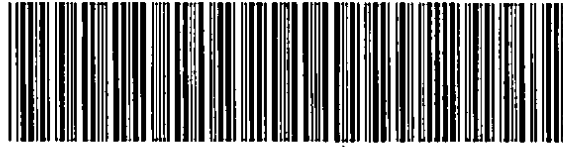
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 AUG - 7 AM 7:34
SECURE MAIL TO STATE
TALLAHASSEE, FLORIDA

AUG 08 2017

J SHIVERS

COVER LETTER

Registration Section
Division of Corporations

GET LIQUID FUNDING, LLC.

SUBJECT: _____
Name of Limited Liability Company

enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JAIME A. DACOSTA

Name of Person

GET LIQUID FUNDING, LLC.

Firm/Company

7801 EDGEWATER DRIVE

Address

WEST PALM BEACH, FL 33406

City/State and Zip Code

jaime.dacosta@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAIME DACOSTA

561

722-6539

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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

GET LIQUID FUNDING LLC

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

: Articles of Organization for this Limited Liability Company were filed on 05/10/2017 and assigned
Florida document number L17000103726.

is amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

ter new principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS)

ter new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX

If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

w 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

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STATIONARY
FALL CREEK FLORIDA

removing Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
removed from our records:

MR = Manager

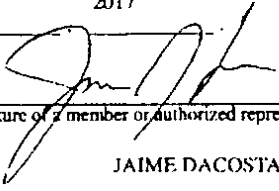
MBR = Authorized Member

<u>g</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
0	KEVIN A. HORN	7710 BEND WAY APT D. LAKE	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Effective date, if other than the date of filing: 07/27/2017 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
The 90th day after the record is filed.

Dated JULY 27 2017


Signature of a member or authorized representative of a member
JAIME DACOSTA

Typed or printed name of signee

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RECEIVED BY MAIL
FALLASSISTED DRID