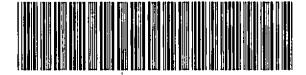
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COVER LETTER

TO;	Registration Sec Division of Corp			
		Lending Soluti	ons of South Florida, LLC	
SUBJI	ECT:			
		Name of Limi	ited Liability Company	
The en	closed Articles of /	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspor	idence concerning this matter	to the following:	
			Sandra Pantoja	
			Name of Person	<u> </u>
			Lending Solutions of South Florida, LLC	
			Firm/Company	
			8225 sw 4th St	
			Address Miami, Fl 33144	
		<u> </u>		
			City/State and Zip Code	
		E-mail address: (t	pantoja822@yahoo.com to be used for future annual report notifi	cation)
For fur	ther information co	ncerning this matter, please co	nil:	
		Sandra Pantoja	ot (305)	3053025012
	Name of		at (305) Area Code Daytime	Telephone Number
Enclos	ed is a check for the	e following amount:		
5 \$2.	5.00 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:

TO:

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

Lending Solutions of South Florida, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on _____ and assigned Florida document number This amendment is submitted to amend the following: 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. 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: Sandra Pantoja Name of New Registered Agent: 8225 sw 4th St New Registered Office Address: Enter Florida street address Miami City

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	Sandra Pantoja	8225 sw 4th St Miami Fl 33144	_ ₫ ∧dd
		 	
			□ Change
Mgr	Miriam Pantoja	8225 sw 4th St Miami Fl 33144	
			Remove
			Change
		_	Add
			Remove
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			Change
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			☐ Change

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If an effective d Note: If the	te, if other than the date of date is listed, the date must be spec- date inserted in this block doe effective date on the Departme	cific and cannot be prior to date of files not meet the applicable statuto	(optional) ing or more than 90 days after filing.) Pursuant to 605.020' ory filing requirements, this date will not be listed as
	specifies a delayed effec day after the record is		ctive time, at 12:01 a.m. on the earlier o
Date 1	November 24	2017	
Dated			
	· 	W. Zick	· >
	Signatu	re of a member or authorized repres	ientative of a member

Page 3 of 3

Filing Fee: \$25.00