Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC. Account Number : I20090000081

Phone

: (307)200-2803

Fax Number

(855)330-1010

Enter the email address for this business entity to be used for future No annual report mailings. Enter only one email address please.

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CASH CASAS LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cash Casas LLC		
(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records Liability Company)	2018 DEC
The Articles of Organization for this Limited Liability Company Florida document number L18000207149	were filed on 08/29/2018	Fand assemed
This amendment is submitted to amend the following:		AHII: 22 SSEE, FL
A. If amending name, enter the new name of the limited liab	oility company here:	L1 10
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2645 Executive Park Dr	ive, #206
(Principal office address MUST BE A STREET ADDRESS)	Weston FL 33331	
Enter new mailing address, if applicable:	2645 Executive Park Dr	ive, #206
(Mailing address MAY BE A POST OFFICE BOX)	Weston FL 33331	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	office address on our records re:	, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<u> </u>
	, Flo	orida
	Cīņ:	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, enter the title, name, and address of each person_being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Hence Holdings LLC	2645 Executive Park Drive, #206	🗹 Add
		Weston, FL 33331	□ Remove
			Change
			□ Add
			Remove
			☐ Change
			□ Remove
			Change
			Add
			□ Remove
			Change
			□ Add
			□ Remove
			Change
			🖸 Add
			□ Remove
			Change

O. If amending any other information, enter ch	nange(s) here: (Attach additional sheets	; if necessary.)
E. Effective date, if other than the date of filing (If an effective date is listed, the date must be specific and Note: If the date inserted in this block does not redocument's effective date on the Department of S	d cannot be prior to date of filing or more than 90- meet the applicable statutory filing requirem	(optional) days after filing.) Pursuant to 605.0207 (3)(ments, this date will not be listed as the
If the record specifies a delayed effective of the 190th day after the record is filed.	date, but not an effective time, at :	
December 13	2018	2018 DEC 13
Margan John	member or authorized representative of a member	2 6
Morgan Noble	member or authorized representative of a memb	
Worgan Wobic	Typed or printed name of signee	AM II: 22 SSEE FL

Page 3 of 3

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