118000219214

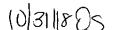
questor's Name)	
dress)	
dress)	· · · · · · · · · · · · · · · · · · ·
//State/Zip/Phone	e #)
☐ WAIT	MAIL
siness Entity Nan	ne)
cument Number)	
_ Certificates ·	of Status
	dress) dress) //State/Zip/Phone WAIT siness Entity Nan cument Number) Certificates

Office Use Only



400319824794

10/22/18--01024--026 **25.00



COVER LETTER

	Registration Se Division of Cor			
e110 112 <i>0</i>	Renewed	Hope Credit Repair, LLC		
SUBJEC	T:	Name of Lim	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
		ondence concerning this matter	-	
		Artesha D Spencer		
			Name of Person	<u>. </u>
			Firm/Company	
		3077 Brenton Manor Loop	, ,	.,
		Winter Haven, Florida 3388	Address 81	
		arteshaspencer07@yahoo.c	City/State and Zip Code	
			to be used for future annual report notif	lication)
	er information c	oncerning this matter, please co	all: 863 5218474	
	<u>.</u>	f Person	at () Area Code Daytime	: Telephone Number
Enclosed	Lis a check for th	ne following amount:		•
	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)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COURT Registration Sectio Division of Corpor Clifton Building 2661 Executive Ce	n ations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Renewed Hope Credit Repair LLC		
(<u>Name of the Limited Liabi</u> (A Floric	lity Company as it now appears on our rec la Limited Liability Company)	ords.)
he Articles of Organization for this Limited Liability	Company were filed on 9/14/2018	and assigned
orida document number L18000219214	·	
nis amendment is submitted to amend the following:		
If amending name, enter the new name of the lin	nited liability company here:	
ope Renewed LLC		
e new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "I	.LC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		** ¬
rincipal office address MUST BE A STREET ADD	RESS)	. 1
		· · ·
		
ter new mailing address, if applicable:		
ailing address MAY BE A POST OFFICE BOX)		
uning dadress meri DE AT 037 OT TICE DOM	······································	
If amending the registered agent and/or regi gistered agent and/or the new registered office add		ords, enter the name of the r
The state of the s		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	tress
		Florida
	City	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>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
		 	Change
			Add
			□ Remove
			Change
			Remove
			□ Change
			□^Add
			Remove
			☐ Change
			Remove
			Change
			Add
			□ Remove
			Change.

444 (1004)	
	· · · · · · · · · · · · · · · · · · ·
	 _
	
	1.0
	.?
	<u> </u>
	· •
ective date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to date of filing (e). If the date inserted in this block does not meet the applicable statutory fument's effective date on the Department of State's records.	or more than 90 days after filing.) Pursuant to 605.03 filing requirements, this date will not be listed
record specifies a delayed effective date, but not an effective he 90th day after the record is filed.	ve time, at 12:01 a.m. on the earlier
od October 17 2018.	
$//\sim$	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00