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(Re	questor's Name)	
- (Add	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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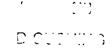


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COVER LETTER

Division of Cor				
CenPOS, L SUBJECT:	LC			
SUBJECT.	Name of Lim	ited Liability Company		
The enclosed Articles of .	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Linda E. Bidon			
		Name of Person		
	U.S. Bank National Assoc	iation		
	· · · · · · · · · · · · · · · · · · ·	Firm/Company		
	800 Nicollet Mall, BC-MN	N-H21N		
		Address		
	Minneapolis, MN 55402			
		City/State and Zip Code		:3 [:]
	linda.bidon@usbank.com			- 8 漢
	E-mail address: (to be used for future annual report notific	ation)	F2 1/2
For further information co	oncerning this matter, please co	all:		カー 5巻 第5
Linda E. Bidon		612 303-7856 at ()		
Name of	Person	Area Code Daytime	Felephone Number	1
Enclosed is a check for th	e following amount:			Ç
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fe Certificate of St Certified Copy (additional copy is	tatus &

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

CenPOS, LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on	and assigned	
Florida document number L19000002486			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	bbreviation "L.L.C."	_
Enter new principal offices address, if applicable:	800 Nicollet Mall, BC-MN-H21N		_
(Principal office address MUST BE A STREET ADDRESS)	Minneapolis, MN 55402		_
		5	-
Enter new mailing address, if applicable:		<u> </u>	. .
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	- [
			ಕ್ಷಪ ಸಾ
B. If amending the registered agent and/or registered of	ffice address on our records, enter	the name of the	iiev
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.	<u></u>	क े पूर्व (/	
Name of New Registered Agent:			_
New Registered Office Address:			
Hem Registered Office Address.	Enter Florida street address		-
	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
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		 	Remove
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			☐ Change

	"	
		<u>.</u>
(If an export of the Note:	tive date, if other than the date of filing: [fective date is listed, the date must be specific and cannot be put of the date inserted in this block does not meet the apparent's effective date on the Department of State's record	prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 plicable statutory filing requirements, this date will not be listed as
	cord specifies a delayed effective date, but a 90th day after the record is filed.	not an effective time, at 12:01 a.m. on the earlier of
Dated	October 24 20 2019	 ·
		E-Brdun

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00