(Re	questor's Name)	
(ive	Agree (Control of the Control of the	
704	dress)	
(Ad	aress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
	—	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	 _
Certified Copies	Certificates	of Status
	-	
·		
Special Instructions to	Filing Officer:	
,		







67/18/21--01014--620 **25.00

JUL 1 4 2021 I ALBRITTON

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Ironstone Capital Inv	vestments LLC		
	<u> </u>		
			Art of Inc. File
			LTD Partnership File
			·
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
org.nature			Vehicle Search
			Driving Record
Requested by: SETH	07/12/21		UCC 1 or 3 File
	$\frac{07/12/21}{Data}$	Time	UCC 11 Search
Name	Date	THE	UCC II Retrieval
Walk-In	Will Pick Up		Courier

COVER LETTER

Div	ision of Co	rporations		
SUBJECT:	IRONSTO	NE CAPITAL FUNDING LI	.C	
3003201.		Name of Li	mited Liability Company	
The engloced	Antinlas of	N		
		Amendment and fee(s) are su		
Please return	all correspo	ndence concerning this matte	er to the following:	
		EVAN R MARBIN, ESQ	DUIRE	
			Name of Person	<u> </u>
		EVAN R MARBIN & AS	SSOCIATES, PA	
			Firm/Company	
		48 EAST FLAGLER STR	REET, PH-104	
			Address	
		MIAMI, FL 33131		
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		SM@3MLAW.NET		
			to be used for future annual report no	tification)
For further info	ormation co	ncerning this matter, please c	all:	
SHERRIE MA	RBIN		305 495-4175	
- 1	Name of 1	Person	at ()	ne Telephone Number
Enclosed is a c	heck for the	following amount:		
\$25.00 Fili	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	(OF		2. A
IDONETONE CAREAL EUNIONIO				and assigned O.
IRONSTONE CAPITAL FUNDING				
(same of the Climite	A Florida Limited	Eliability Compan	ears on our records.)	1
-			f 10 2010	Py .
The Articles of Organization for this Limited Lia	bility Compan	y were filed on :	January 10, 2019	and assigned ' 矣
Florida document number L19000011910	·			ر۶
This amendment is submitted to amend the follow	ving;			2 N. 2 1
A. If amending name, enter the new name of t	he limited lial	bility company	<u>here</u> :	
IRONSTONE CAPITAL INVESTMENTS LLC				
The new name must be distinguishable and contain the wor	ds "Limsted Liab	ility Company," the	e designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applical	ole:	19790 West I	Dixie Highway, PH-3	
(Principal office address MUST BE A STREET ADDRESS)		Miami, FL 33	180	
Enter new mailing address, if applicable:		19790 West D	ixic Highway, PH-3	
(Mailing address MAY BE A POST OFFICE BE	9X)	Miami, FL 33	180	
B. If amending the registered agent and/or reg agent and/or the new registered office address l	istered office : here:	address on our	records, enter the name	of the new registered
Name of New Registered Agent:	EVAN R. MAF	RBIN, ESQUIRE		
New Registered Office Address:	19790 West Di:	xie Highway, PH	-3	
		Enter Fla	rida street address	
	Miami		, Florida ³³¹⁸	30
		Cin		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
MGR	Mordechay Maximoff	14473 Draft Horse Lane	
		Wellington, FL 33414	□Remove
		 .	
			□Remove
			□Add
			□Remove
			☐ Change
			□Add
			□Change
			□Add
			□Remove
			□Change
			DAdd
		 	□Remove
			□ Change

		
		
		
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	an the date of filing:	605.0207 (. listed as ti
ecord specifies a delayed eff is filed.	ffective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a	ifter the
ted July 12	2021	
_COM K	Mix	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00