# 19000059417

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Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

Prodig	ee Financial LLC	
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on 03/01/2019	and assigned
Florida document number L19000059417		
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 I	Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	5)	
		<del></del>
		r,
Enter new mailing address, if applicable:		021
(Mailing address MAY BE A POST OFFICE BOX)		
	٥	6
B. If amending the registered agent and/or registered off	ice address on our records, <u>enter the</u>	name of the new registere
agent and/or the new registered office address here:		西 5
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 "L.L.C."  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 of the	, U.	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<del> </del>	, Florid	la
	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 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
MGR	Kyer Bonner	4501 cleurs ave , bldg c tampa fl 33610	<b>=</b> Add
			□Remove
			□Change
AMBR	D'Andre Ginyard	4501 clavis ave , bldg c tampa fl 33610	∃Add
			□Remove
			□Change
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			□Change
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:Note: 11	re date, if other than the date of filing:	(3)(b) the
f the record ecord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.	
Dated _	O2/04Christopher D. Warren	