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SECRETARY OF STATE

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COVER LETTER

	gistration Sec vision of Corp			
SUBJECT	COPED.LLC	:		
SUBJECT	•	Name of Lim	ited Liability Company	
The enclose	ed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspon	dence concerning this matter	to the following:	
		Ann Dunsford Curley		
			Name of Person	
			Firm/Company	
		142 River Road		
			Address	
		Orange Park, Florida 3207	3	
		anndunsford@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report no	etification)
For further	information cor	ncerning this matter, please ca	all:	
Ann Dunsf	ord Curley		904 607-0230	
	Name of I	erson		me Telephone Number
Enclosed is	a check for the	following amount:		
\$25.00	Filing 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)

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

COPED, LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our record- Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L19000085109}{L19000085109}$.	were filed on 03/27/19	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
River Bee Financial Services Group, LLC		20
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation L.L.C.
Enter new principal offices address, if applicable:	142 River Road	
Principal office address MUST BE A STREET ADDRESS)	Orange Park, FL 32073	
		MO E
Enter new mailing address, if applicable:	142 River Road	8: 02 STATE E, FL
Mailing address MAY BE A POST OFFICE BOX)	Orange Park, FL 32073	
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>enter t</u>	the name of the new regist
Name of New Registered Agent:		-
New Registered Office Address:		
	Enter Florida street address	
	Flo	rida
Sour Designation of America States of the America Designation of the Americ	euv	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
AMBR	Michael Wallwork	1516 Palinfield Avenue	
		Orange Park, FL 32073	■Remove
			□Change
AMBR	Daniel Garcia	2233 Park Avenue, Ste;303	
		Orange Park, FL 32073	■Remove
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