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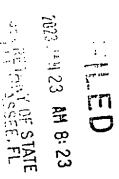
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COVER LETTER -

TO: Registration Section Division of Corporations	
Absolute Funding Solutions LLC SUBJECT:	
	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Sahil Madan	
Name of Person	
Absolute Funding Solutions LLC	
Firm/Company	
707 N Franklin St. Unit 3	
Address	
Tampa Florida 33602	
City/State and Zip Code	
sahil@terraminvest.com	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	all:
Sahil Madan 72	599-8303
Name of Person	Area Code & Daytime Telephone Number
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
Enclosed is a check for the following amount:	

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS) 1150 NW 72ND AVE TOWER I STE 455 #383 MIAMI, FL 33126 MIAMI, FL 33126 04/05/2019 L19000095142 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: LEGALINC CORPORATE SERVICES INC. Registered Office Address: 476 RIVERSIDE AVE. JACKSONVILLE JACKSONVILLE FL 32202 Benter name of NEW Registered Agent and/or NEW Registered Office address: 707 N Franklin St, Unit 3 Tampa FL 33602 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited hiability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in provisions of gal statutes relative to the proper and complete performance of my duties, and a my lamilar 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 member the limited liability company has been notified in writing of this change.	1.	Name of the limited liability company: Absolute Funding	ng Solutio	ons LLC	
1150 NW 72ND AVE TOWER I STE 455 #383 1150					
MIAMI, FL 33126 04/05/2019 L19000095142 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: LEGALINC CORPORATE SERVICES INC. Registered Office Address: 476 RIVERSIDE AVE. JACKSONVILLE JACKSONVILLE JACKSONVILLE FL 32202 Sahil Madan NEW Registered Office Address: 707 N Franklin St, Unit 3 Tampa FL 33602 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of a member or authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the appointment as registered agent as provided for in Chapter 605, F. Or, if this document is being filed to merely reflect a change in the registered agent as provided for in Chapter 605, F. Or, if the document is being filed to merely reflect a change in the registered agent as provided for in Chapter 605, F. Or, if the fine filed to merely reflect a change in the registered agent as provided for in Chapter 605, F. Or, if the fine filed to merely reflect a change in the registered agent as provided for in Chapter 605, F. Or, if the fine filed to merely reflect a change in the registered agent as provided for in Chapter 605, F. Or, if the fine filed to merely reflect a change in the registered agent as provided for in Chapter 605, F. Or, if the fine filed to merely reflect a change in the registered agent as provided for in Chapter 605, F. Or, if the fine filed to me	(-	Principal office address of limited liability company:			
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Signature of Registered Agent