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SECRETARY OF STATE

AUG 15 2018 T. LEMIEUX

## **COVER LETTER**

TO: Registration Section Division of Corporatio	ns		•	
SUBJECT: RMB	Recovery /	Agent, LLC ed Liability Company	<u> </u>	
The enclosed Articles of Amenda	ment and fee(s) are subm	itted for filing.		
Please return all correspondence				
·	_			
	Kolando	Blanco	)	
<del></del>		Name of Person		
	RMB Re	covery Age	nt, UC	
	3541 Altis C	irde North	Apt #01	306
		Addicas		
	Hialeah, F	L 33018	3	
		City/State and Zip Code		
<u>r</u>	blanco@rm E-mail address: (10	brecovery a	GULL CON	<u>}                                    </u>
For further information concerning				
$\mathcal{D}_1$ 1 7	7 /	•	٧ - ست	
Kolando B	ilanco	at ( <u>786_</u> )	537- 9	0603
Name of Person		Area Code	Daytime Telepi	ione Number
Enclosed is a check for the follow	wing amount:			
	30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en		2 \$60.00 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

RIICLES OF ORGANIZATION		
OF F	1	1

_ RMB Reco	wery Gaer	w appears on our record	HED_
(A P)	orida Limited Liability Co	mpany) Serberra	E. C. C.
		T. T. L. MATRAIS	5040 A-1:3:32
The Articles of Organization for this Limited Liabili			2014 Content and assigned
Florida document number <u>L1900014640</u>	<u>)()                                   </u>	SECRE TALLAH	TARY OF STATE ASSEE, FLORIDA
This amendment is submitted to amend the following	ā:	7716	
A. If amending name, enter the new name of the	limited liability com	nany h <i>ere</i> :	•
<u> </u>			
The new name must be distinguishable and contain the words	 "Limited Liability Compar	y " the designation "I I C	or the abbreviation "I. I. C."
		y. the designation Est	of the unfortestation (2.13.C.
Enter new principal offices address, if applicable:	•	·	<del></del>
Principal office address MUST BE A STREET AL	DDRESS)		
	<del></del>		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX			
	<del> </del>		
B. If amending the registered agent and/or re	registered office add	ross on our record	s onto the name of the
registered agent and/or the new registered office a		ress on our record.	s, enter the name of the
Name of New Registered Agent:			
range of their registered regent.		<del></del>	
New Registered Office Address:			
	£	nter Florida street addres	C.S
<u></u>		Fl	orida
	Ciù.		Zip Code
New Registered Agent's Signature, if changing Regist	tered Agent:		
I hereby accept the appointment as registered age provisions of all statutes relative to the proper an accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan	nd complete performa ed agent as provided j stered office address.	ince of my duties, ar for in Chapter 605,	nd I am familiar with and F.S. Or, if this document i
	If Changing Regis	tered Agent, Signature	of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being addedor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Rolando Blanco	3541 Altis Cir North #1306	<b>⊠</b> Add
		Hialcah, FL 33018	□ Remove
			Change
<del></del>			Add
			Remove
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Note:	ive date, if other than the date of filing:	207 (. as tl
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.	of:
Dated		
Dated		
	House	
	Signature of a member or authorized representative of a member	
	Kolando Blanco	

Page 3 of 3

Filing Fee: \$25.00