

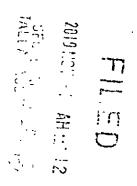
(Red	questor's Ñame)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
	,	•
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

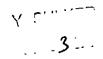
Office Use Only



200336312822

11/01/19--01021--028 \*\*55.00





## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: ALC FORECLOSURES LLC
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Andres 1950 Name of Person
ALC FORCLOSUMS LLC Firm/Company
Firm/Company
338 EAST 174LBY ST
Orlando FL 32 806  City/State and Zip Code  Chilpan 89 & Gmail. Com  E-mail address: (to be used for future annual report notification)
City/State and Zip Code
Chilean 89 a Omail. Com  Email address: (to be used for future angual report notification)
g-man address, the used for future annual report addressary
For further information concerning this matter, please call:
And VPG L 490 at 321 2786/85  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, 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 OF

Or Or	
	CLOSUVES LLC
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.) ibility Company)
	7/06/10
The Articles of Organization for this Limited Liability Company w	vere filed on $\frac{O/U8/I9}{}$ and assigned
Florida document number / 19000176205	•
monda document number 2	
This amendment is submitted to amend the following:	
	M
A. If amending name, enter the new name of the limited liabili	ity company nere:
·	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "L.L.C." 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)	
Making dadress MAT BE A TOST OFFICE BOX)	
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	
registered agent and/or the new registered office address here.	
Name of New Registered Agent:	
Nam Baristand Office Address	
New Registered Office Address:	Enter Florida street address
	, Florida

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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> MGR	Name Andres 1450	Address 338 EAH Maleyst	Type of Action OM 44 OFL 31806 MAD		
			□ Remove		
			Change		
			☐ Add		
			☐ Remove		
			☐ Remove		
			AL-EI Chainge		
			Add		
			Remove		
			□ CHange		
			Add		
			☐ Remove		
			☐ Change		
			Add		
			□ Remove		
			Change		

							<del></del>
		<del></del>			<del></del> -		
			<del> </del>			·····	<del></del>
							<del></del>
		<del></del>			<del></del>		
	<del></del>						
			<del></del>				
							<del></del>
1							
active date	if other than the	date of filing			(	antional)	
te: If the da	<ul> <li>if other than the e is listed, the date must te inserted in this blactive date on the D</li> </ul>	ock does not me	eet the applical	o date of filing or ole statutory fili	more than 90 day: ng requirement	s after filing.) Pursu s, this date will no	ant to 605.020' of be listed as
	torre and on the B	epartment of or	are steemas				
record sp he 90th o	ecifies a delayed lay after the rec	l effective da ord is filed.	ate, but not	an effective	time, at 12:	01 a.m. on th	e earlier o
ed							
		·		7			
				// ~	-		
		Signature of a m	ember or author	ized representativ	e of a member		

Page 3 of 3

Filing Fee: \$25.00