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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: Registration Secti Division of Corpo | | | | |
|---|---|---|---|----------------------------------|
| SUBJECT: P.e. | ralta eredit | Solutions, LLC | | |
| SUBJECT. | Name of Limi | ted Liability Company | | |
| The enclosed Articles of An | nendment and fee(s) are subr | nitted for filing. | | |
| Please return all correspond | ence concerning this matter t | to the following: | | |
| | Mickella Mickella | PeraHa Name of Person | | |
| | _ | edit Solutions, LLC Firm/Company | | |
| | 2508 2: | 5 th way | | |
| | West Palm | Beach, FL 3340 City/State and Zip Code | 07 | |
| | Peraltacredit | Solutions & Youro | cation) | |
| For further information con- | cerning this matter, please ca | dt: | | م د د م |
| Michelle (Name of P | Peralta erson | at (<u>561</u>) <u>398</u> - | - 8689 Telephone Number | |
| Enclosed is a check for the | following amount: | | | |
| □ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy | \$60.00 Filing Fee. Certificate of Status of | 20 6 73 50 1 Stalless 20 50 3 |

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Peralta Credit (Name of the Limited Liability (A Florida) | SOlutions, LLC y Company as it now appears on our records.) Limited Liability Company) | |
|---|--|--|
| The Articles of Organization for this Limited Liability Co Florida document number <u>L19</u> 0018008月 | registered agent and/or registered office address on our records, enter the name of the new | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limit | ted liability company here: | |
| The new name must be distinguishable and contain the words "Limit | r | |
| Enter new principal offices address, if applicable: | چه در ان | |
| (Principal office address MUST BE A STREET ADDRESS) | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| registered agent and/or the new registered office addr Name of New Registered Agent: | ress <u>here</u> : | |
| New Registered Office Address: 250 | 08 25 th Way Enter Florida street didress | |
| We | Enter Florida street alidress 131 Palm Beach, Florida 33407 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 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 Type of Action Address Title <u>Name</u> Jeffrey Peralta 2508 25th Way XAdd WestPalm Beach, FL 33407 - Remove Change Michelle Peralta West PalmBeach, FL 33407 Remove ____hange □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Remove _□ Change □ Add ☐ Remove ☐ Change

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| Note: If | late, if other than the date of filing: 10/22/2019 (optional) e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a effective date on the Department of State's records. |
| e recor The 90 | specifies a delayed effective date, but not an effective time, at $12\colon\!01$ a.m. on the earlier of the day after the record is filed. |
| Dated | 10/22/2019 . 2019 . |
| | Signature of a piember or authorized representative of a member |
| | Mychelle Peralta Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00