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(Requestor's Name)
(Address)
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	Ĉity/State/Zip/Phone #)
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	Document Number)
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COVER LETTER

ro:	Registration Sec Division of Corp			
	Equity Len	ding Solutions LLC	•	
SUBJ	ECT:			<u></u>
		Name of Limi	ted Liability Company	
The en	iclosed Articles of .	Amendment and fee(s) are subs	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Daniel Benarroch		
			Name of Person	
		Equity Lending Solutions	LLC	
			Firm/Company	
		120000 Biscayne Blvd Su	ite 218	
			Address	- ·····
		Miami, Florida 33181		
			City/State and Zip Code	
		info@equitylendingsolution E-mail address: (1)	to be used for future annual report notif	ication)
For fu	rther information c	oncerning this matter, please ca	·	•
	el Benarroch	,	305 3367332	
			at ()	
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$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 OF

ARTICLES OF ORGANIZATION OF

Equity Lending Solutions LLC	25/9/19/19	<i>I.</i> 5.
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	1, P::12: 27
The Articles of Organization for this Limited Liability Company L19000233668	were filed on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	E. Company "the Assistantian of LC"	r the abbraviation of 1 C'
	120000 Biscayne Blvd, Suite 21	
Enter new principal offices address, if applicable:	Miami, FL 33181	
(Principal office address MUST BE A STREET ADDRESS)		
	120000 Biscayne Blvd, Suite 21	R
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33181	
	Wildliff, FIZ 33761	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the ne
	_	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<u> </u>	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, and provided for in Chapter 605, F.	I am familiar with and S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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>	<u>Address</u>	Type of Action
MGR	BENARROCH, HAIM D	12000 BISCAYNE BLVD. SUITE 218	
		Miami, FL 33181	
			□ Remove
		12000 BISCAYNE BLVD. SUITE 218	
MGR	CASTRO, HECTOR	Miami, Fl 33181	
		12000 BISCAYNE BLVD. Add Add Remove 12000 BISCAYNE BLVD. SUITE 218 Change Add Remove Change Add Remove Add Add Remove Add Add Remove Add Add Add Remove Add Add	
			Add
			🗆 Remove
			□ Change
			Add
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			Change
			Add
			Remove
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			Add
			□ Remove
			Change

· , •	n, enter change(s) here: (Attach additional sheets, if necessary.)	
Effective date, if other than the date if an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	de of filing:	207 l as
ne record specifies a delayed e The 90th day after the record	effective date, but not an effective time, at 12:01 a.m. on the earlier d is filed.	r of
October 30th	2019	
Dated	——·	
	A / / -	
	gnature of a member or authorized representative of a member	
Daniel Benarroch	/	

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Filing Fee: \$25.00