

L19 000 255 182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

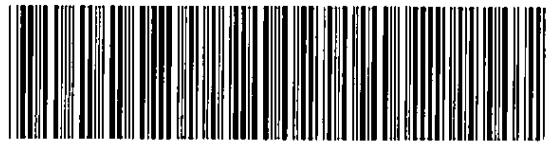
(Business Entity Name)

(Document Number)

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2021 JUN 19 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

Palm Lending Services 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:

Peter Woorits

Name of Person

High Palm Motors LLC

Firm/Company

4781 N. Congress Ave #209

Address

Boynton Beach, FL 33426

City/State and Zip Code

Peter.Woorits@yahoo.com

E-mail address: (to be used for future annual report notification)

2024 JUN 19 PM 1:44
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

Peter Woorits

Name of Person

at (561)

Area Code

777-0550

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe St., Tallahassee, FL 32309

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

High Palm LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/10/2019 and assigned Florida document number L19000255182.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Palm Lending Services LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4781 N Congress Ave #269
Boynton Beach, FL 33426

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4781 N. Congress Ave #269
Boynton Beach, FL 33426

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

2024 JUN 19 PM 1:44
SECRETARY OF STATE
TALLAHASSEE, FL
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Peter Looiits</u>	<u>10324 Willow Oaks trail</u>	<input checked="" type="checkbox"/> Add
		<u>Boynton Beach, FL 33473</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Natasha Morales</u>	<u>434 NE 7th Ave #2</u>	<input checked="" type="checkbox"/> Add
		<u>Delray Beach FL 33483</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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2024 JUN 19 PM 4:14
SECRETARY OF STATE
TALLAHASSEE, FL


2014-05-01
SECRET
TALIAFERRO

SECRET
2024 JUN 19 PM 1:44
SECRETARY OF STATE

(If an effective 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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

June 10, 2024.

 Signature of a member or authorized representative of a member

Typed or printed name of signee