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COVER LETTER

TO:

	Registration S Division of Co			
.>+++++++		Resolution Srevices, LLC		
SUBJEC		Name of Lim	ited Liability Company	
The encl	osed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all corresp	ondence concerning this matter	to the following:	
		Christopher J. Kirrane, Esc	1.	
			Name of Person	
		Dunning, Kirrane, McNich	nols & Garner, L.L.P.	
			Firm Company	.
		P.O. Box 560		
			Address	
		Mashpee, MA 02649		
		<u></u>	City/State and Zip Code	
		mkirrane@dunningkirrane.		· · · · · · · · · · · · · · · · · · ·
For furth	er information	E-mail address: (concerning this matter, please c	to be used for future annual report not	ufication)
Marsha P. Kirrane, Paralegal		508 477-6500 at ()	ne Telephone Number	
	Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed	Lis a check for	the following amount:		
■ S25.	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		Street Address: Registration Sc	etion	
	_	Corporations	Registration Section Division of Corporations	
	P.O. Box 63	27	The Centre of	Tallahassee
	Tallahassee.	FL 32314	2415 N. Monre	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

McLean Resolution Services, LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our rec nited Liability Company)	(ords.)
The Articles of Organization for this Limited Liability Com	pany were filed on March 10, 202	20 and assigned
Florida document number 1.20000078464		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
McLean Resolution Services, LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "l	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Not applicable.	
(Principal office address MUST BE A STREET ADDRES.	<u> </u>	
Enter new mailing address, if applicable:	Not applicable.	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
		75
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, <u>en</u>	ter the name of the new registere
Name of New Registered Agent: Not applie	rable.	
New Registered Office Address:	Enter Florida street ad	dress
		. Florida
	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 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>	Address	Type of Action
			□Add
			Remove
			□Change
			□Add
			□Remove
			[]Change
			
			□Remove
			[]Change
			□Add
			□Remove
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Effective date, if other than the date of filing: (transetteetive date is listed, the date must be specific and camou be poor to date of thoughts. Note: If the date inserted in this block does not meet the approache standors in document's effective date on the Department of State's records.	more more by days align tiling i Pursonn to 605 (120%) is
he record specifies a delayed effective date, but not an effective (nnc. at 1, 01) a model is filed.	conclide carries of (10). The 90th day after the
Dated March 18 2020 Signature of Amember in authorized representation	ve of a men ber
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