# 120000206104

(Re	equestor's Name)	
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### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: The Funding ExPect, 11c 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:
EVENS Bellevue
The Funding Expertile
1208 S. Federal Hwy
City/State and Zip Code  The Fonding Export 1 2 9 MAIL. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
EVENS Bellevue at Sbd. 617-3552  Name of Person Area Code Daytime Telephone Number
Enclosed is a cheek for the following amount:
\$25.00 Filing Fee Sectificate of Status Securificate of Status Secur

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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 Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 67/16/2020 and assigned Florida document number L20000206104 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 1208 S. Federal H 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) 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 City 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>	Address	Type of Action
			□Remove
			☐ Change
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an effe <u>ote:</u>	we date, if other than the date of filing:
ecoré is file	I 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 ed.
ited_	10/22/2021
	Signature of a member exhutherized representative of a member

Filing Fee: \$25.00