L20000256639

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COVER LETTER

Registration Section Division of Corporations

TO:

Score830L1	.C		
SUBJECT:	Name of Lim	ited Liability Company	V
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Francis Llibre		
		Name of Person	
	Francis Llibre		
		Firm/Company	
	7157 NARCOOSSEE RD	.,#1237	
		Address	 -
	ORLANDO, FL 32822		
		City/State and Zip Code	20:
	info@score830.com		. 23 J
	E-mail address: (to be used for future annual report notif	2023 JUN 23
For further information co	oncerning this matter, please c	all:	• •
Francis Llibre		786 6671685	= 5
Name of	Person	Area Code Daytime	: Telephone Number ; 55
Enclosed is a check for the	e 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 S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	Street Address: Registration Sec Division of Cor The Centre of T	porations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Score830 LLC	an our records)	
(Name of the Limited Linbility Compan (A Florida Limited L	(ability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.20000256629	were filed on <u>08/19/2020</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Score Financial Group LLC	at LC arthr	abbreviation "LA.C."
Score Financial Group LLC The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" of the	anne comme
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
17 megan aprecia		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2023 JIJI 23 AH
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the r	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	
	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>	Name	Address	Type of Action
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			□Change
			□Add
			□Remove
			☐ Change
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ster. If the date inserted in t	n the date of filing: te must be specific and cannot be put his block does not meet the app the Department of State's recor	officable grainfor à minis	(option of than 90 days after grequirements, this	onal) (filing.) Pur s date will	Suant to 605.0 not be listed
ecord specifies a delayed ef is filed.	Tective date, but not an effectiv	re time, at 12:01 a.m. (on the earlier of: (b) The 90	th day after
june 23	. 2023	 ·			
	Francis Llib Signature of a member or a	M77			

Filing Fee: \$25.00