121000088045

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE





300389877123

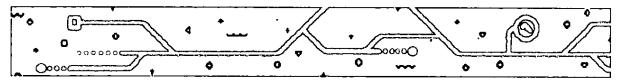
06/24/22--01025--010 **25.00

FILED

1022 JUN 24 PH 1: 19

SECRETARY OF SAC





zenbusiness

Jun 20, 2022

Florida Secretary of State Division of Corporations 2415 N Monroe St Suite 810 Tallahassee, FL 32303

RE: Collection Recovery Administration LLC

To Whom It May Concern:

Attached please find the executed <u>Articles of Amendment</u>, for the above referenced. Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

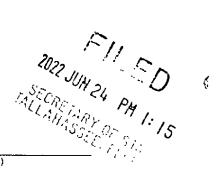
ZenBusiness Inc Attention: Kelly Castro 5511 Parkerest Dr., Suite 103 Austin Tx 78731

If you have any questions, please feel free to contact me at 844-493-6249 or at fulfillment@zenbusiness.com.

Thank you.

Kelly Castro ZenBusiness Customer Success

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



COLLECTION RECOVERY ADMINISTRATION LLC

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

bility company here:			
hility Company," the designat	ion "LLC" or the abbreviation "L.L.C."		
300 se 27th st			
Cape Coral, FL 33904			
1242 Southwest Pine I	sland Road		
unit 42			
Cape Coral, FL 33991-2120			
	. <u>. </u>		
Enter Florida stre	pet address		
Cape Coral, FL 33904 1242 Southwest Pine Island Road unit 42 Cape Coral, FL 33991-2120 ered office address on our records, enter the name of the new rece: Enter Florida street address			
City	Florida Zip Code		
<u>t:</u>			
ree to act in this capac	ity. I further agree to comply with the ties, and I am familiar with and		
	300 se 27th st Cape Coral, FL 33904 1242 Southwest Pine I unit 42 Cape Coral, FL 33991 e address on our records Enter Florida stree		

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>	Name	<u>Address</u>	Type of Action
MGR	Alec A Deslis	300 se 27th st	= Add
		cape coral , FL 33904	to a
			☐ Change
AMBR	Alec Deslis	1242 Southwest Pine Island Road	≣∧dd
		unit 42-345	□Remove
		Cape Coral, FL 33991-2120	□ Change
AMBR	Patricia Dos Santos	1242 Southwest Pine Island Road	□Add
		unit 42	■Remove
		Cape Coral, FL 33991-2120	□Change
			DAdd
			□Remove
			□Add
			□Remove
			☐ Change
			□Add
			Remove
			☐Change

			<u></u>					
<u></u> _								_
							LPHL	_
						<u></u>		
	-						<u> </u>	_
								_
	-							_
								_
								_
								_
								_
								_
			·					_
								_
								
								_
	<u></u>		····					_
					<u></u>		- "	 -
							-	
				<u></u>			• • • • • • • • • • • • • • • • • • • •	_
								_
								_
			,,					_
 -					·			_
								_
								_
		 				<u> </u>		_