

121000352442.

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

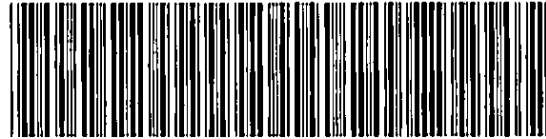
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Q. SILAS

JUN 19 2022

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SECRETARY OF STATE  
TALLAHASSEE, FL

JUN 15 PM 3:31  
2022 JUN 15 PM 12:03

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**CORPORATE  
ACCESS,  
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236 East 6th Avenue, Tallahassee, Florida 32303  
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**WALK IN**

**PICK UP:** 6/15 LYNES

**CERTIFIED COPY**

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**AMENDS**

**1. RESILIENCE PAWN & CASH, LLC**  
(CORPORATE NAME AND DOCUMENT #)

**2.**  
(CORPORATE NAME AND DOCUMENT #)

**3.**  
(CORPORATE NAME AND DOCUMENT #)

**4.**  
(CORPORATE NAME AND DOCUMENT #)

**5.**  
(CORPORATE NAME AND DOCUMENT #)

**6.**  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

## COVER LETTER

TO: **Registration Section  
Division of Corporations**

SUBJECT: Resilience Pawn & Cash, 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:

Ricot Riphin

Name of Person

Firm/Company

Address

2650 Airport-pulling Rd suite G. Naples, Florida 34112

City/State and Zip Code

Naples, florida. 34112

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

For further information concerning this matter, please call:

Ricot Riphin

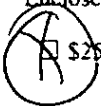
at ( 919 ) 945-6333

Name of Person

Area Code

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 Street, Suite 810  
Tallahassee, FL 32303

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

**FILED**

JUN 15 PM 5: 31

SECRETARY OF STATE  
TALLAHASSEE, FL

Resilience Pawn & Cash, 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 08/05/2021 and assigned  
Florida document number L21000352442.

This amendment is submitted to amend the following:

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

Resilience Pawn, LLC

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

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:

Ricot Riphin

New Registered Office Address:

2170 Wilson Blvd N.

*Enter Florida street address*

Naples

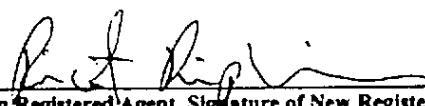
Florida 34120

*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 Changing Registered Agent, Signature of New Registered Agent

**MGR = Manager**  
**AMBR = Authorized Member**

[illegible]

[illegible]

(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.

Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**