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COVER LETTER

	Registration Se Division of Cor			
SUBJEC		le Notary and Loan Signing Se	ervices of SFL, LLC	
SOBJEC	.1;	Name of Lim	nited Liability Company	
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	turn all correspe	ondence concerning this matter	to the following:	
		Larinda K. Kimbrell		
			Name of Person	
		Agile Mobile NOtary and	Loan Signing Services of SFL, LLC	
			Firm/Company	
		300 SE 2nd Street, ste 600		
			Address	
		Fort Lauderdale, FL 33301	I	
			City/State and Zip Code	
		lkimbrell@agilestlmobilend	•	
		E-mail address; (to be used for future annual report notification)	
For further	er information e	oncerning this matter, please co	all:	
Larinda I	C. Kimbrell		954 272-8309 at ()	
	Name o	f Person	Area Code Daytime Telephone Number	
Enclosed	is a check for th	ne following amount:		
□ \$25.0	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee Certified Copy (additional copy is enclosed) ☐ Certificate of State Certified Copy (additional copy is enclosed)	tus &
Mailing Address: Registration Section			Street Address: Registration Section	
I	Division of C	orporations	Division of Corporations	
	P.O. Box 632 Tallahassee, F		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 APR 26 AM 10: 18

Agile Mobile Notary and Loan Signing Services of SFL, LLC

SECRETARY OF STATE TALLAHASSEE, FLORE

(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 Liab	oility Company were filed on November 17, 2021	and assigned
Florida document number 1.21000494699		
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the	he limited liability company here:	
Agile Professional Ventures, LLC		
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office address by Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	Flori	ida
	City	idaZip Code
New Registered Agent's Signature, if changing Reg	gistered Agent:	
I hereby accept the appointment as registered a provisions of all statutes relative to the proper a accept the obligations of my position as registe being filed to merely reflect a change in the reg company has been notified in writing of this cha	and complete performance of my duties, and ered agent as provided for in Chapter 605, F., gistered office address, I hereby confirm that	I am familiar with and S. Or, if this document is
	If Changing Registered Agent, Signature of N	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
			□Add
			□Remove
		 	□Change
			□Remove
			□Change
			□Remove
			
			□Remove
			□Add
			□Remove
			□Change

Effective date, if other than the date of filing: (If an effective date, if other than the date of filing: (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.) Porsuant to 605.0207 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. 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 cord is filed. Dated 18th day of April 2022 Signature of a niember of authorized representative of a niember Laginda K. Kimbrell	υ.	ormation, enter change(s) here		• •
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Filing Fee: \$25.00