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COVER LETTER

TO: Registration Se Division of Cor		*	• • •	•
	gage Group, "LLC"	•	;	•
SUBJECT:	Name of Lim	iited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Darren Yassen			
		Name of Person		-
	Rapid Mortgage Group LL	.c		
		Firm/Company		•
	743 NW 98th Cirlce			
		Address		•
	Plantation, FL 33324			2022 FEB 10
	· .	City/State and Zip Code		THE PER
	darrenyassen@gmail.com			
For further information c	E-mail address: (oncerning this matter, please c	to be used for future annual report to all:	otification)	O PH
Darren Yassen		754 273-1047		1910 C
Name o	f Person		ime Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Mailing Addres		Street Address:		
Registration 9 Division of C		Registration S Division of Co		
P.O. Box 632		The Centre of		
Tallahassee, 1	FL 32314	2415 N. Moni	roe Street, Suite 8	10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rapid Mortgage Group, "LLC"		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on January 10th, 2022	and assigned
Torida document number	<u>_</u> .	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limi	ited liability company here:	
Rapid Mortgage Group LLC		
he new name must be distinguishable and contain the words "Lim	ited 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 ADDR	RESS)	102
inter new mailing address, if applicable:		50 -
		11
Mailing address MAY BE A POST OFFICE BOX)		—— ———————————————————————————————————
If amending the registered agent and/or registered gent and/or the new registered office address here:	d office address on our records, <u>enter the na</u>	ame of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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.

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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

Title	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			Remove
			☐ Change
			□Add
			□Remove
			Change
			20EX FEB
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			□ Remove

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Note: if the	e date inserted in effective date or	the Department	of State's records.				•
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