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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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DIVISION OF CURPORATION

22 JUN -7 PM 2: 31

T. MATTHEWS JUN 17 2022

COVER LETTER

		ation Secti of Corpo			
:		. Mortgag	e LLC	•	
SUBJEC	СТ:			ited Liability Company	
The encl	osed Art	icles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please re	tum all c	correspond	ence concerning this matter	to the following:	
			Michael Dempsey		
				Name of Person	· · · · · · · · · · · · · · · · · · ·
			ZenBusiness Inc.		
				Name of Person Firm/Company Address Sity/State and Zip Code e used for future annual report notification) ### Area Code Daytime Telephone Number \$60.00 Filing Fee. Certificate of Status & Certificd Copy (additional copy is enclosed) Street Address:	
			336 E College Ave, Ste 30	1	
				Address	
			Tallahassee, F1, 32301		
				City/State and Zip Code	
			fulfillment@zenbusiness.co		
				·	ication)
For furth	er inforn	nation con	cerning this matter, please ca	dl:	
Michael	Dempse	y c/o ZenE	Business Inc.		
		Name of P	erson		Telephone Number
Enclosed	l is a che	ck for the	following amount:		
■ \$25.	.00 Filing	g Fee	☐ \$30.00 Filing Fee & Certificate of Status	• •	Certificate of Status & Certified Copy
		Address: ration Sec	ction		tion
			porations	Registration Section Division of Corporations	
	P.O. Be	ox 6327		The Centre of T	allahassee
	Tallaha	assee, FL	. 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION SECRETARY OF STATE OF ORPORATION' OF OT

22 JUN -7 PM 2: 31

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(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.22000134029}{1.0000134029}$.	were filed on 03/17/2022 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ullity company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	1645 Palm Beach Lakes Blvd		
(Principal office address MUST BE A STREET ADDRESS)	Suite 1200		
	West Palm Beach, FL 33401		
Enter new mailing address, if applicable:	1645 Palm Beach Lakes Blvd		
(Mailing address MAY BE A POST OFFICE BOX)	Suite 1200		
	West Palm Beach, FL 33401		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the name of the new registered 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 agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is		

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Frank P Lyon	PO Box 895	□Add
		Palm Beach, FL 33480	
			Remove
			Change
			□Add
			□Remove
			□ Change
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/s/ Frank P Lyon Signature of a member or authorized representative of a member	May 13	2022		
Signature of a member or authorized representative of a member	ated	 -		

Filing Fee: \$25.00