

L22 000 356237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

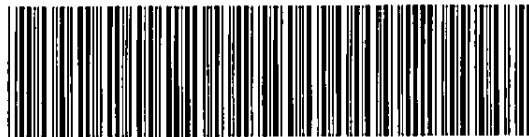
(Business Entity Name)

(Document Number)

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R. HUNT

02/27/23

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FF SPV FUND 1 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:

Kristen Akel

Name of Person

Florida Funders

Firm/Company

1311 N Westshore Blvd Suite 101

Address

Tampa, FL 3308

City/State and Zip Code

Legal@Floridafunders.com

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

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2023 FEB 27 PM 2:58  
TAMPA, FLORIDA

For further information concerning this matter, please call:

Kristen Akel

813 775-6990

at ( )

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

**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

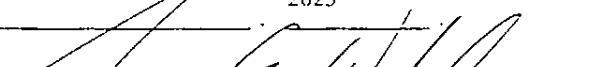
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
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2007 FEB 27 PM 2:58  
HALL COUNTY FL

200 FEB 27 PM 2:58  
STATE  
FL

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated February 7 2023

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Thomas Wallace  
\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**