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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

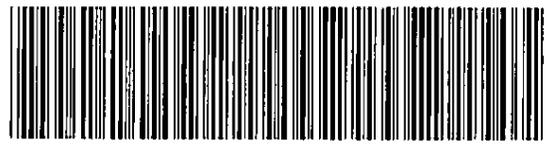
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL  
2024 JAN 16 PM 12:03

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

Euclid Asset Recovery LLC

**SUBJECT:** \_\_\_\_\_  
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:

Peter J Gamon

\_\_\_\_\_  
Name of Person

Euclid Asset Recovery LLC

\_\_\_\_\_  
Firm/Company

2701 Manor Hill Dr

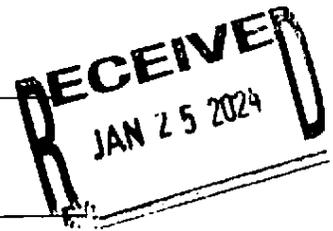
\_\_\_\_\_  
Address

Brandon, Florida, 33511, USA

\_\_\_\_\_  
City/State and Zip Code

Gamonp10@gmail.com

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



For further information concerning this matter, please call:

Peter J Gamon

727 623 - 7740

\_\_\_\_\_  
Name of Person at (\_\_\_\_\_) \_\_\_\_\_  
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**

Euclid Asset Recovery 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 August 15th, 2022 and assigned Florida document number 1.22000359200.

This amendment is submitted to amend the following:

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

Euclid File Solutions 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)

7402 N 56th Street

Suite 355

Tampa, FL, 33617, USA

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

2701 Manor Hill Dr

Brandon, FL, 33511, USA

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2024 JAN 16 PM 12:03  
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TALLAHASSEE

**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:

N/A

New Registered Office Address:

N/A

*Enter Florida street address*

N/A

*City*

Florida

N/A

*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.*

N/A

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>
MGRM	Peter J Gamon	7402 N 56th St	<input type="checkbox"/> Add
		Suite 355	<input type="checkbox"/> Remove
		Tampa, FL, 33617, USA	<input checked="" type="checkbox"/> Change
MGRM	Benjamin C Chiudina	7402 N 56th St	<input type="checkbox"/> Add
		Suite 355	<input type="checkbox"/> Remove
		Tampa, FL, 33617, USA	<input checked="" type="checkbox"/> Change
Partner	Sean T Harden	3305 W Marlin Ave	<input type="checkbox"/> Add
		Tampa, FL, 33611, USA	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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