Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ORION PLACEMENT, LLC

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SEP 15 2023

Fax: 8134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Orion Placement, LCC			
(Name of the Limited Liability Compa (A Florida Limited).	ny as it now appears on our records.) hability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L23000312352	were filed on 06/29/23 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	7.0		
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	:		
(Mailing address MAY BE A POST OFFICE BOX)	j.		
inding united that the state of	· · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	iddress on our records, <u>enter the name of the new registered</u>		
New Registered Office Address:	Enter Florida spect address		
	, Florida		
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as paint 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

9/14/2023 \$2 45:07 PDT

To 18506176383

Page: 3/4

From Registered Agents Inc.

Fax: 8134365206

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>	Name	Address	Type of Action
AMBR	MISSIRLIAN, JONATHAN	7901 4TH ST N STE 300	□Add
		ST. PETERSBURG, FL 33702	
			[IChange
AMBR	SOLMAN, JUSTIN	7901 4TH ST N STE 300	□Add
		ST_PETERSBURG, FL 33702	
			□ Change
MGR	TRIPLE J PLACEMENT, LLC	7901 4TH ST N STE 300	
		ST. PETERSBURG, FL 33702	□Remove
			「I Change
			□Remove
			El Change
			□Add
			∪Remove
			☐ Change
			□Add
			□Remove
			□Change

To 18506176383

From Registered Agents Inc.

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Effecti	ive date, if other than the c	late of filipor		(optional)	
(Haa eff	ective date is listed, the date must l	be specific and cannot be prior a	date of filing or more than	90 days after filing.) Pursuant	io 605.0207
Note:	If the date inserted in this block	ck does not meet the applical	ole statutory filing requir	ements, this date will not b	e listed as
docum	ent's effective date on the Dep	partment of State's records.			
	d specifies a delayed effective	date, but not an effective tin	e, at 12:04 a.m. on the c	arlier of: (b) The 90th day	after the
ord is fil	ed,				
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Dated	September 14th	. 2023	_ '		
	12 1 -	ignature of a member or author			
	Made on	per to the first	 :		
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Typed or printed name of signed