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Office Use Only

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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Al COLL	ECTIONS, LLC Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Corpor	ate Maintenance Le	ad
	·	Name of Person	
	Proc	essing Department	
		Firm Company	
		1450 Vassar St	
		Address	
		Reno, NV 89502	
		City State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c		
_			
	ing Department	at (800) 638-2320	T. 1. 1. 2. 1
Name o	f Person	Area Code Daytim	e Felephone Number
Enclosed is a check for the	ne 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)
Registr Divisic P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 issee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co	on rations

Tallahassee, FL 32301



IMPORTANT NOTICE



PLEASE SEND ALL DOCUMENTS –
APPROVED OR REJECTED TO THE ADDRESS
BELOW.

INC AUTHORITY ATTN: CORPORATE MAINTENANCE LEAD

1450 VASSAR ST

RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

· TO:

PHYSICAL: Dept. of State Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING:

Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM:

Inc Authority, LLC

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE:

Friday, October 13, 2023

SENT FLA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Amendment

For: ALCOLLECTIONS, LLC

We have included payment in the amount of $\underline{$25.00}$ for the following fees:

• Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 OCT 24 AM 7:55

AI COLLECTIONS, LLC	- 1 111 1-33
(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 10/02/23	_ and assigned
Florida document number L23000455144	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbre	rviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BON)	
B. If amending the registered agent and/or registered office address on our records, <u>enter the registered agent and/or the new registered office address here:</u>	e name of the ne
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	

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.

Cin

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

	٠,		
AMBR	=,	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
MGR	Anita Fernandez	.310.N_Orange_Ave_Unit_1126	
		Orlando, FL 32801	
			Change
MGR	MGR Anita Fernandes	310 N. Orange Ave. Unit 1126	Add
	Orlando, FL 32801	Remove	
			Change
			Add
			Remove
			Change
			Add
			Remove
			□ Change
			Add
			Remove
			☐ Change
		□ Remove	
			Change

٠	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ote:	ive date, if other than the date of filing: N/A cotive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a tent's effective date on the Department of State's records.
rec The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
	- Alle
	Signature of a member or authorized representative of a member
	Anita Fernandes