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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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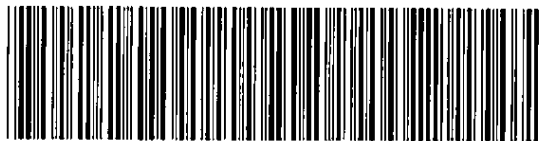
(Business Entity Name)

(Document Number)

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2024 MAY 13 PM 5:05

SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Direct Capital Wimauma 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:

Zachary Bellinghausen
Name of Person

Direct Capital Wimauma LLC
Firm/Company

2014 Edgewater Drive # 304
Address

Orlando, Florida 32804
City/State and Zip Code

bellinghausen.z@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Zachary Bellinghausen at (407) 965-6862
Name of Person Area Code Daytime Telephone Number
Ray Fang 845-667-9688

Enclosed is a check for the following amount:

- | | | | |
|--------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Direct Capital Wimauma 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 1-18-24

Florida document number L24000036281

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 abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2014 Edgewater Drive # 304

Orlando, Florida 32804

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2014 Edgewater Drive # 304

Orlando, FL 32804

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:

Zachary Bellinghansen

New Registered Office Address:

2014 Edgewater Drive # 304

Enter Florida street address

Orlando

City

Florida

32804

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.


If Changing Registered Agent, Signature of New Registered Agent

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2024 MAR 13 PM 5:05
SECRETARY OF STATE
TALLAHASSEE, FL

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>
<u>MGR</u>	<u>Daniel McCabe</u>	<u>13701 W Jewell Ave</u>	<input type="checkbox"/> Add
		<u>Ste 200-28</u>	<input checked="" type="checkbox"/> Remove
		<u>Lakewood, Co 80228</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Andrew McCabe</u>	<u>13701 W Jewell Ave</u>	<input type="checkbox"/> Add
		<u>Ste 200-28</u>	<input checked="" type="checkbox"/> Remove
		<u>Lakewood, Co 80228</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Scott Rodli</u>	<u>13701 W Jewell Ave</u>	<input type="checkbox"/> Add
		<u>Ste 200-28</u>	<input checked="" type="checkbox"/> Remove
		<u>Lakewood, Co 80228</u>	<input type="checkbox"/> Change
MGR	Zachary Bellinghausen	2014 Edgewater Dr	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Zachary Bellinghausen</u>	<u>2014 Edgewater Drive # 304</u>	<input checked="" type="checkbox"/> Add
		<u>Orlando, FL 32804</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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 May 6th, 2024

Zachary Bellinghausen
Typed or printed name of signee