(210012900)

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basilioss Elitity Hallie)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

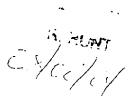
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 For any issues please contact Cheyanne Davis

Date:_	(10/07/202)) 202-1882
Name:	Cheyanne Davis	
	nce #: 2460547	
Entity N	Name VERASOL LENDING SOLUTIONS,	LLC
	Articles of Incorporation/Authorization to Transact Business	
✓ /	Amendment	28
	Change of Agent	<u>.</u>
	Reinstatement	
	Conversion	
<u> </u>	Merger	MH 8: 44 GF STATE SEE, FL
	Dissolution/Withdrawal	ले हैं-
□ +	Fictitious Name	
	Other	
Authori	zed Amount: \$25.00	
Signatu	ire:Oruwuctika	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ng Solutions, LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears d Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Compar	ny were filed on	03/20/2024	_ and assigned
Torida document numberL24000137860			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ability company her	<u>re</u> :	
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the de	signation "LLC" or the abbre	viation "L.L.C."
Inter new principal offices address, if applicable:			;~3
Principal office address MUST BE A STREET ADDRESS)		÷	
		2-7	
		2.1	(,)
Inter new mailing address, if applicable:		14 4.7 6: 1 6: 1	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		ਹੈ। ਹੈ।	89
		T F	+-
. If amending the registered agent and/or registered	office address on	our records, enter the	name of the
egistered agent and/or the new registered office address he	<u>re</u> :		
Name of Name Davis and A			
Name of New Registered Agent:	.		
New Registered Office Address:			
	Enter Floria	la strevi address	
		Florida	
	Civ		Zin 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 anlending 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	Jason Ziegler	110 Channel Drive	
		Lake Mary. FL 32746	⊒ Remove
			□ Change
AMBR	Charla Gilmore	110 Channel Drive	
		Lake Mary, FL 32746	⊡ Remove
			Change
			Remove
		<u> </u>	
			Ä ⊒ Ädd
		CO C	Remove
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fan effective d Note: If the i	te, if other than the date of late is listed, the date must be spec date inserted in this block doe flective date on the Departme	cific and cannot be prior as not meet the application.	able statutory filir	nore than 90 days at	tional) er filing.) Pu tis date will	Suant to (not be l	505.03 isted
e record s The 90th	pecifies a delayed effec day after the record is	tive date, but no filed.	t an effective	time, at 12:01	a.m. on	the ear	rlier
ated	August 2	20024	- •				
	Signatu	_					