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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FILE IT USA INC. Account Number : I20190000121

: (718)925-2025 Fax Number : (718)925-2027

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

Email Address: service@tile:tusa.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RF SERVICING LLC

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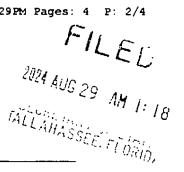
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08/29/2024 15:29

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



RF Servicing 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 <u>06/21/2024</u> \_\_\_\_\_ and assigned Florida document number \_\_\_\_\_L24000282593 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." RF Servicing LLC Enter new principal offices address, if applicable: 19600 Koger Blvd N (Principal office address MUST BE A STREET ADDRESS) St Petersburg, FL 33702 RF Servicing LLC Enter new mailing address, if applicable: 19600 Koger Blvd N (Mailing address MAY BE A POST OFFICE BOX) St Petersburg, FL 33702 ٠... 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: New Registered Office Address: Enter Florida street address \_\_. Florida \_\_\_

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

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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>	Address	Type of Action
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			□Remove
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ective date, if other than the effective date is listed, the date mute: If the date inserted in this beament's effective date on the E	st be specific and cannot be prior to date of filing or m lock does not meet the applicable statutory filin	(optional) nore than 90 days after filing.) Pursuant to 605.020 ng requirements, this date will not be listed a
cord specifies a delayed effecti s tiled.	ve date, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90th day after th
August 29	. 2024	
	/s/Mirian Sokwarts Signature of a member or authorized representative	