## 2400029114655

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

Office Use Only



500435254145

08/26/24--01025--002 \*\*25.00

## **COVER LETTER**

	APEX FUNI	DING EXPERTS LLC				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	Articles of A	amendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	idence concerning this matter	to the following:			
		CLAYTON I SALAZAR		SECR		
			Name of Person	RET A		
		APEX FUNDING EXPER	TS LLC	ETARY OF LAHASSE		
			Firm/Company			
		13345 OAKENSHAW LN		TARY OF STATE AHASSEE, FL		
	Address					
		ORLANDO, FL 32832				
			City/State and Zip Code			
		claytonsellstl@gmail.com				
			to be used for future annual report noti:	lication)		
For further in	formation co	ncerning this matter, please co	ull:			
CLAYTON I	SALAZAR,		at ( )			
	Name of	Person	at () Area Code Daytime	e Telephone Number		
Enclosed is a	check for the	following amount:				
<b>≘</b> \$25.00 Fi	iling Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

Mailing Address:

TO:

Registration Section Division of Corporations

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

APEX FUNDING EXPERTS 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  $\frac{06/24/2024}{-}$ and assigned Florida document number 1.24000284655 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 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 7726 Winegard Road, Suite 64 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Orlando, FL 32809 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

## 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 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
MBR	GLORIA EDNA SACRISTAN	2777 HEATHERSIDE AVENUE	■Add
		ORLANDO, FL 32822	□Remove
			□ Change
MGR	ANDREÍNA G. SALAZAR	13345 OAKSHAW LN.	□Add
		ORLANDO, FL 32832	Remove
			PHI2:30  ESECROTARY STATE  TALLAHASTEE, FL
		<del> </del>	本 シ D Add P H B B B B B B B B B B B B B
			T 22:00:00
			□ Change
			□Add
			□Remove
			□ Change
			□Remove
			□ Change
			Add
			□Remove

\_ 🗆 Change

				<del>-</del>				
		•					-,	
			. 1_					
		·						
			<del></del>	<del></del>		<del></del>	SEC	2024 AUS
	<del></del>						<b>三</b> 器	gus
							TARY OF	26
							388 30.	PH
							STA E. FL	PH 12: 30
		<del></del>	<del></del>			·	<u> </u>	-8
			·				<u>.</u>	_
	<del></del>							_
	<del></del>							
Effective date, if other than	the date of filir	19:	JUNE 2	5.2024	(n)	otional)		
(If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	must be specific ar s block does not	id cannot be p meet the app	rior to date of dicable stati	filing or more	than 90 days a	fter filing.) P	ursuant to 6 ill not be l	05.0207 isted as
he record specifies a delayed effe ord is filed.	ctive date, but no	t an effectiv	e time, at 12	2:01 a.m. on	the earlier of	(b) The	90th day af	fter the
Dated		. 2024						
	/	//	//.//					
		7 1116	11/1/					

Filing Fee: \$25.00

Typed or printed name of signee