L24000370773

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





600436871556

09/20/24:-01000--017 **25.60



LM Funding, LLC 1200 W. Platt St.

Suite 100

Tampa FL 33606

Enclosed please find information to amend the name of our LLC. Thank you for your assistance with this matter.

Richard Russell

RRussell@lmfunding.com

813-222-8996

CFO

COVER LETTER

:

P.O. Box 6327

Tallahassee, FL 32314

TO:	Registration Sec Division of Corp				
SUBJEC	CT:	Sunstine As Name of Lim	Sociation Lendi	ing LLC	
The encl	losed Articles of A	Amendment and fec(s) are sub	mitted for filing.		
Please re	cturn all correspon	ndence concerning this matter	to the following:		
		R.≥	hand Russell Name of Person		
			Fund:		
			. W. Platt St.		
			74 FL City/State and Zip Code	3606	Depliser 20 HAIDIEL
			to be used for future annual report not		20 70 74 74
For furth	ner information co	oncerning this matter, please c	all:		7 5
	Richard Name of	Person	at (<u>&13</u>) <u>222</u> - Area Code Daytin	- 899 L ne Telephone Number	
Enclosed	is a check for the	e following amount:			
Ŭ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &
	Mailing Address Registration S	ection	<u>Street Address:</u> Registration Se		
	Division of Co	orporations	Division of Co	rporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunshine	Association Lending, LLC	
(Name of the Limited Liabi (A Florid	ASSOCIATION Lending, CLC y Company as it now appears on our records.) Limited Liability Company)	
	-1 1	
ne Articles of Organization for this Limited Liability	ompany were filed on $\frac{8/23/2-1}{}$ and assign	ned
orida document number <u>L24000370773</u>	<u>_</u> .	
is amendment is submitted to amend the following:		
If amending name, enter the new name of the lin	ted liability company here:	
Sunshine Asso	ited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C"	
e new name must be distinguishable and contain the words "Lit	ted Liability Company," the designation "LLC" or the abbreviation "L.L.C	
nter new principal offices address, if applicable:	AC S	
rincipal office address MUST BE A STREET ADD	FG F	- :
incipal office address MOST BE TISTREET TIBE	200	
	0 m	•
nter new mailing address, if applicable:		
<u>lailing address MAY BE A POST OFFICE BOX)</u>		
		_
If amending the registered agent and/or registere ent and/or the new registered office address here:	office address on our records, enter the name of the new r	regist
ent and/or the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City 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 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
		200m.	□ Add
			□Remove
			□Add
			Петоче
			S Change
			□Add
			□Remove
			□Change
			□Remove
			Change
			□Remove
			□Change

	6914	name	Change.	
	/		J	
				
			· 	<u></u>
				-
			-	20
				2024 SEP
				三百 写
				3 3
				7,000
				H. 5
				75 25
				<u> </u>
			<u> </u>	
	- · -			
-			 :	
stive data if othe	u than the date of	filinge		(optional)
ffective date is listed,	r than the date of the date must be specif	fic and cannot be prior	to date of filing or more than	90 days after filing.) Pursuant to 605.0
	ed in this block does ite on the Departmen			ements, this date will not be listed
ment a cricerve du	ne on me Bepartmen	it of Blate 5 records	•	
and enacifies a dela	ued affective date. by	it not an effective t	ime at 12:01 a.m. on the e	arlier of: (b) The 90th day after t
filed.	yed effective date, or	it not an effective t	ine, at 12.01 a.m. on the c	arrier or. (b) The your day arrer (
d Sent	ember 16 th	. 2024		
<u></u>			orized representative of a me	
(Z	of Cussel	20		
	Signature	of a member or auth	orized representative of a me	mber