

### Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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Tc:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017

Phone : (855)498-5500 Fax Number : (800)432-3622

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RED CAPITAL MARKETS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
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Corporate Filing Menu

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CR2E055 (9/15)

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: RED CAPITAL MARKETS Name of Foreign Limited	
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submi	tted for filing.
Please return all correspondence concerning this matter t	o the following:
Geneva Harrison	
Name of Person	
Capitol Services - Corporate Filings To	eam
Firm/Company	<del></del>
PO Box 1831	
Address	FE SE
Austin, TX 78767	19 FEB - 1 AM 9: 55
City/State and Zip Code	
regagent@capitolservices.com	
E-mail address: (to be used for future annual report no	milication)
For further information concerning this matter, please ca	H:
Geneva Harrison	
Name of Person Area	Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Plorida 32314
	5 Filing Fee & S60 Filing Fee, ertified Copy Certificate of Status & Certified Copy

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

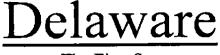
#### SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Plorkia Department of
State: RED CAPITAL MARKETS, LLC
Enter new principal office address, if applicable:
(Principal office address MUST BB A STREET ADDRESS)
Enter new mailing address, if applicable:  (Mailing address  MAY BB A POST OFFICE BOX)
2. The Florida document number of this limited liability company is: M1000003548
3. Jurisdiction of its organization: Delaware
08/10/2010 E
4. Date authorized to do business in Florida:  SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company:  OREC Securities, LLC  (must contain "Limited Liability Company, " "L.L.C.," or "LLC,"):
5. New name of the limited liability company:  (must contain "Limited Liability Company, " "L.L.C.," or "LLC,") ::
S. New name of the limited liability company: OREC Securities, LLC (must contain "Limited Liability Company," "L.L.C.," or "LLC.)."  (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attachs copy of the written consent of the inenagers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")
6. If amending the registered agent and/or registered officer 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 Zip Code
City Zip Code
New Registered Agent's Signature, if changing Registered Agent:  I haveby 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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8. If the amendment o	hanges person, title or capacity in a	accordance with 605.0902 (1)(e), indicate tha	t change:	
Title/ Capacity	Namo	Address	Type of Action	
			Add	
			Remove	
			Dⅆ	
			Remove	
			Remove 19	ه . پ دفخمسین
			Regione 1989 5	
a forementioned a	the law of which this entity that	by the official having sustedy of records in the sanized.	Remove	
	James J. Henson	of the authorized representative		

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "RED CAPITAL MARKETS, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "OREC SECURITIES, LLC" ON THE TWENTY-EIGHTH DAY OF DECEMBER, A.D. 2018, AT 10:50 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIRST DAY OF JANUARY, A.D. 2019 AT 12:01 O'CLOCK A.M.

Authentication: 202077163 Date: 01-14-19

4819661 8320 SR# 20190263736

You may verify this certificate online at corp.delaware.gov/authver.shtml