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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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DEC 1'8 2021 I ALBRITTON

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: REO RECOVERY TRUST LLC	
Name of Foreign L	Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are	e submitted for filing.
Please return all correspondence concerning this n	natter to the following:
PERRY GRUMAN	
Name of Person	
PERRY G GRUMAN P A	
Firm/Company	
3400 W KENNEDY BLVD	
Address	
TAMPA FL 33609	
City/State and Zip Code	
PERRY@GRUMANLAW.COM	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, ple	ease call:
PERRY GRUMAN at	813 870-1614
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: 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
Enclosed is a check for the following am \$\B\$\$\$525 Filing Fee \$\B\$\$\$ \$\$\$\$\$ S30 Filing Fee & \$\B\$	ount: \$ \$55 Filing Fee & \$ \$60 Filing Fee, Certified Copy Certified Copy



November 8, 2021

PERRY GRUMAN PERRY G. GRUMAN PA 3400 W. KENNEDY BLVD TAMPA, FL 33609

SUBJECT: REO RECOVERY LAWYERS LLC

Ref. Number: M15000008354

We have received your document for REO RECOVERY LAWYERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 121A00027140

Irene Albritton
Regulatory Specialist III

www.sunbiz.org



2021 NOT -1 PM 1:05

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 19, 2021

PERRY G. GRUMAN PERRY G. GRUMAN, P.A. 3400 W. KENNEDY BLVD TAMPA, FL 33609

SUBJECT: REO RECOVERY LAWYERS LLC

Ref. Number: M15000008354

We have received your document for REO RECOVERY LAWYERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Limited Liability Company, but your entity is a Foreign Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist III

Letter Number: 821A00025474

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 Florida	Department of
State: REO RECOVERY LAWYERS LLC		
Enter new principal office address, if applicable:		
(<u>Principal office address</u> MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (<u>Mailing address</u> MAY BE A POST OFFICE BOX)		70 *
2. The Florida document number of this limited lial	bility company is: M15000008	بــ بن انان انان
3. Jurisdiction of its organization: DELAWARE		
4. Date authorized to do business in Florida: 10/19	0/2015	
SECTION II (5-9 complete only the applicable of		
New name of the limited liability company: RE (must	O RECOVERY TRUST LLC contain "Limited Liability Co	ompany, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mar must contain "Limited Liability Company," "L.L.C	naging members adopting the	business in Florida and attach a alternate name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office ad	ed officer address on our recor	ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Fator Flori	da Street Address
	Enter Flori	
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agen the provisions of all statutes relative to the proper and accept the obligations of my position as registed document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree to act in this cape and complete performance of ered agent as provided for in in the registered office addres	my duties, and I am familiar with Chapter 605, F.S. Or, if this

3

If Changing Registered Agent, Signature of New Registered Agent

3. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:				
itle/ Capacity	<u>Name</u>	Address	Type of Action	
			DAdd	
			□Remov	
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aforementioned an	he law of which this entity is org	by the official having custody of records in	□Remo n the	

Filing Fee: \$25.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "REO RECOVERY LAWYERS

LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO

"REO RECOVERY TRUST LLC" ON THE TWENTY-SEVENTH DAY OF APRIL,

A.D. 2021, AT 8 O'CLOCK A.M.



Authentication: 204871491

.

Date: 12-06-21

State Of Delaware

Entity Details

10/27/2021 10:13:29AM

File Number: 5743520

Incorporation Date / Formation Date: 5/7/2015

Entity Name: REO RECOVERY TRUST LLC

Entity Kind: Limited Liability Company

Entity Type: General

Residency: Domestic

State: DELAWARE

Status: Good Standing

Status Date: 7/20/2021

Registered Agent Information

Name: SPIEGEL & UTRERA, P.A.

Address: 9 EAST LOOCKERMAN ST STE 202

City: DOVER

Country:

State: DE

Postal Code: 19901

Phone: 302-744-9800

Tax Information

Last AnnualReport Filed: (

Tax Due: \$0

Annual Tax Assessment:

\$300

Total Authorized Shares:

Filing History (Last 5 Filings)

Seq	Description	No of Pages	Filing Date mm/dd/yyyy	Filing Time	Effective Date mm/dd/yyyy
1	Amendment Name REO RECOVERY LAWYERS L	1	4/27/2021	8:00 AM	4/27/2021
2	Binkt Address - LLC	1	2/23/2017	3:41 PM	2/23/2017
3	uc	1	5/7/2015	3:46 PM	5/7/2015