

MI6000005845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

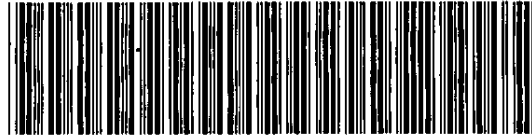
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000288621180

000288621180
08/03/16--01016--023 **25.00

RECEIVED
STATE
FILING OFFICE

16 AUG -3 PM 8:53

NOT REJECTED
TO ACHIEVE
SUFFICIENCY OF FILING

16 AUG -3 PM 2:21

AUG 04 2016
J. HARRIS

CT Corporation System

515 E Park Avenue, Tallahassee, FL, 32301 850-222-1092

JusticeFunds LLC**M16000005845**☐ Nonprofit☐ Foreign☐ Limited Partnership☐ LLC☐ Certified Copy☐ Call When Ready☒ Walk In☐ Mail Out

Name _____

Availability _____

Document _____

Examiner _____

Updater _____

Verifier _____

W.P. Verifier _____

☒ **Amendment**☐ Dissolution/Withdrawal☐ Reinstatement☐ Annual Report☐ Name Registration☐ Fictitious Name☐ Photocopies☐ Call If Problem☐ Will Wait

8/3/2016

KM☐ Merger☐ Mark☐ Other☐ UCC☐ CUS☐ After 4:30☒ Pick Up

Order#:

10109959

Ref#:

Amount: \$

**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: Justice Funds LLC

Enter new principal office address, if applicable: _____

(Principal office address
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____

(Mailing address
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M16000005845

3. Jurisdiction of its organization: DE

4. Date authorized to do business in Florida: 7-21-16

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(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 attach a copy of the written consent of the managers 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

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 Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Title/ Capacity	Name	Address	Type of Action
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M	Sutton Park Capital LLC	777 Brickell Ave, Ste 1100 Miami, FL 33131	<input checked="" type="checkbox"/> Add
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☐ Remove

CEO	Steven W. Pasko	777 Brickell Ave., Ste. 1100 Miami, FL 33131	<input checked="" type="checkbox"/> Add
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☐ Remove

Pres	Joshua C. Wander	777 Brickell Ave., Ste. 1100 Miami, FL 33131	<input checked="" type="checkbox"/> Add
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☐ Remove

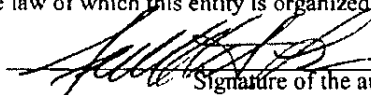
☐ Add

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9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of the authorized representative

Frederick A. Love

Typed or printed name of signee

Filing Fee: \$25.00

16 AUG -3 AM 8:53
SECTION 24 STATE
TALLAHASSEE, FL 32304
2013