

M1800000 6092

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

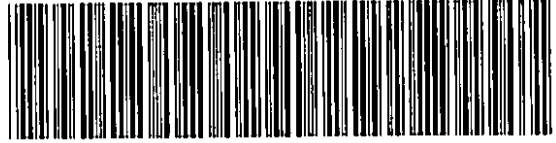
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/14/19--01026--009 **60.00

FILED

2019 JAN 14 PM 2:51

SECRETARY OF STATE
TALLAHASSEE, FL

R. WHITE
JAN 17 2019

January 10, 2019

Florida Division of Corporations – Registration Section
Clifton Building – 2661 Executive Center Circle
Tallahassee, FL 32301

RE: Fiserv LS LLC

To Whom It May Concern:

Enclosed, please find a completed Amended to a Certificate of Authority to Transact Business in Florida changing the name of Fiserv LS LLC to Sagent M&C, LLC, a Delaware Certificate of Existence, a Delaware Certificate of Amendment, and a check for the filing fee.

Please return proof of filing to David Kokoszka C/O Sagent Lending Technologies, 6400 Main St, Amherst, NY 14221.

If you need any further information, please contact me at 716-616-5062 or david.kokoszka@SagentLending.com.

Respectfully,



David Kokoszka
Compliance Specialist
716-616-5062
david.kokoszka@SagentLending.com

Enclosure

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fiserv LS LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Kokoszka

Name of Person

Sagent Lending Technologies

Firm/Company

6400 Main St

Address

Amherst, NY 14221

City/State and Zip Code

Lending.Compliance@SagentLending.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Kokoszka

Name of Person

at (716) 616-5062

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, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☒ \$60 Filing Fee,
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 Florida Department of

State: Fiserv LS 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: M18000006092

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 06/29/2018

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

5. New name of the limited liability company: Sagent M&C, 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 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

2019 JAN 14 PM 2:51
CLERK OF DISTRICT COURT
TALLAHASSEE, FL

FILED

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:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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_____	_____	_____	<input type="checkbox"/> Add
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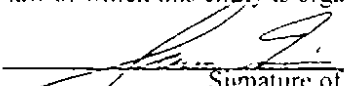
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9. Attached is a certificate, if required: no more than 90 days old, evidencing the
aforementioned amendment(s), duly authenticated by the official having custody of records in the
jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

Sean Quinn

Typed or printed name of signee

Filing Fee: \$25.00

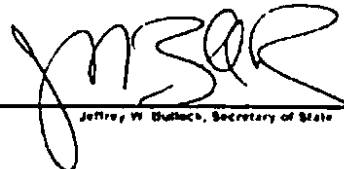
Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF "FISERV LS LLC",
CHANGING ITS NAME FROM "FISERV LS LLC" TO "SAGENT M&C, LLC",
FILED IN THIS OFFICE ON THE ELEVENTH DAY OF DECEMBER, A.D.
2018, AT 1:30 O'CLOCK P.M.




Jeffrey W. Bullock, Secretary of State

6743171 8100
SR# 20188255613

Authentication: 204139852
Date: 12-19-18

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

**CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF FORMATION
OF
FISERV LS LLC**

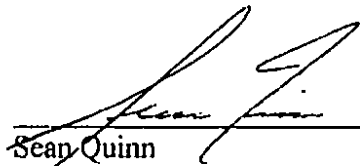
(a Delaware limited liability company)

It is hereby certified that:

1. The name of the limited liability company is Fiserv LS LLC (the "Company").
2. The Certificate of Formation of the Company is hereby amended by striking out Article 1 thereof and substituting in lieu of said Article the following new Article:

"1. The name of the limited liability company is Sagent M&C, LLC."

Executed on December 11, 2018.



Sean Quinn
Authorized Person

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SAGENT M&C, LLC" IS DULY FORMED UNDER
THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A
LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF
THE NINETEENTH DAY OF DECEMBER, A.D. 2018.



6743171 8300

SR# 20188254235

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 204139692

Date: 12-19-18