M21000000274

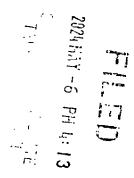
(Requestor's Name)				
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PICK-UP	WAIT	MAIL		
(Busine	ss Entity Name)			
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				
Inconnect	FULLY			

Office Use Only



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COVER LETTER

TO:

Registration Section

Division of Corporations Novation Inheritance, 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: Marc Harris, Esq. Name of Person NOVATION Inheritance , n/k/a ProbateCash LLC Firm/Company 1641 Worthington Road, Suite 310 Address West Palm Beach, Florida 33409 City/State and Zip Code Marc@ProbateCash.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Robin Shapiro Area Code & Daytime Telephone Number Name of Person **Mailing Address:** Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: ■\$25 Filing Fee ■ \$30 Filing Fee & ☐ \$55 Filing Fee & \$60 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy CR2E055 (9/15)

2

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)

FILED

State: NOVATION Inheritance, LLC		$i_{i,j}$	
Enter new principal office address, if applicable:	No change		
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)			
Enter new mailing address, if applicable: (Mailing address)	No change		
MAY BE A POST OFFICE BOX)			
2. The Florida document number of this limited lia	ability company is: 1.210	00000274	
3. Jurisdiction of its organization: Delaware	-		
4. Date authorized to do business in Florida: $\frac{12/2}{1}$	19/202 0		
SECTION II (5-9 complete only the applicable	changes)		
 New name of the limited liability company: P (mus) 	robateCash, LLC st contain "Limited Liabil	ity Company, " "L.L.C.	." or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.	naging members adoptin	ucting business in Florid g the alternate name. Th	la and attach a se alternate name
6. If amending the registered agent and/or register registered agent and/or the new registered office a	ed officer address on our ddress here;	records, enter the name	of the new
Name of New Registered Agent: No change			
New Registered Office Address: No change			
	Enter	Florida Street Address	
	City	Florida	lin Coda

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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.

itle/ Capacity	<u>Name</u>	Address	Type of Action
	-		□Remo
			□Add
	-	, <u> </u>	□Remo
· <u> </u>			□Add
	-		□Remo
			□Add
	-		□Remo
			□Add
aforementioned am	icate, if required; no more than 90 days tendment(s), duly authenticated by the he law of which this entity is organized	official having custody of reco	□Remo

Filing Fee: \$25.00

State Of Delaware

Entity Details

4/29/2024 10:12:14AM

File Number 7027377

Incorporation Date / Formation Date: 8/23/2018

Entity Name: PROBATECASH, LLC

Entity Kind: Limited Liability Company Entity Type: General

Residency: Domestic State: DELAWARE

Status: Good Standing Status Date: 8/23/2018

Registered Agent Information

Name: CORPORATION SERVICE COMPANY

Address: 251 LITTLE FALLS DRIVE

City: WILMINGTON Country:

State: DE Postal Code. 19808

Phone: 302-636-5401

Tax Information

Last AnnualReport Filed: 0 Tax Due: \$0

Annual Tax Assessment: \$300 Total Authorized Shares:

Filing History (Last 6 Filings)

Seq	Description	No of Pages	Filing Date mm/dd/yyyy	Filing Time	Effective Date mm/dd/yyyy
1	Amendment Name NOVATION INHERITANCE LLC	1	9/5/2023	6:54 PM	9/5/2023
2	Change of Agent Amendment for LP/LLC/GP/LLP 9	1	3/11/2019	11:11 AM	3/11/2019
3	LLC	. 1	8/23/2018	1:13 PM	8/23/2018

ProbateCash, LLC

1641 Worthington Road, Suite 310 West Palm Beach, Florida 33409 ProbateCash.com

Registration Section, Division of Corporations

The Centre of Tallahassee

2415 North Monroe Street, suite 810

Tallahassee, FL 32303

Re: Name Change by Foreign LLC L21000000274 "

Ladies and gentlemen:

Please be advised that "Novation Inheritance, LLC" (a Delaware limited liability company) (FL doc # L21000000274) has changed its name to "ProbateCash, LLC. There has been no change of ownership, address, membership interest, or tax status.

Enclosed for your review and files is:

- Completed, signed and dated Florida Form "Application by Foreign Limited liability company to file amendment to certificate of authority to transact business in Florida"
- 2. My check for \$60 payable to for filing fee, certificate of status, and certified copy.
- 3. A true and correct copy of Delaware State online good standing status report for ProbateCash, LLC referencing the name change from Novation Inheritance, LLC to ProbateCash, LLC on the Delaware Secretary of State's official records.

Accordingly, please update your files and records for this entity (L21000000274) so as to reflect its name change to ProbateCash, LLC (from Novation Inheritance, LLC).

Thank you in advance for your attention to this matter.

If you have any questions, please call or "text" me at 917-297-5616. Or email me at Robin@PtobateCash.com.

Respectfully.

ProbateCash, LbC

dated: May 1, 2024

Robin M Shapiro its Authorized Representative