

M22000004569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

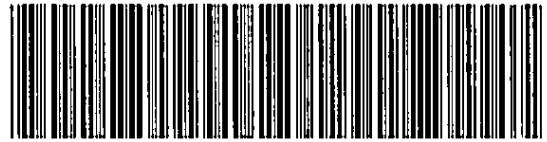
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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06/08/22--01022--004 \*\*55.00

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2022 JUN -8 PM 5:52  
TALLAHASSEE, FLORIDA

AUG 23 2022  
S. PRAJNE

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Castle Park Lending 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:

Patrick Curry

Name of Person

Orbis Funding LLC (Formally Castle Park Lending LLC)

Firm/Company

4965 US Hwy 42 Suite 1000

Address

Louisville, KY 40222

City/State and Zip Code

pat.curry@OrbisFunding.com

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

For further information concerning this matter, please call:

Patrick Curry

at ( 502 ) 905-2183

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 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: Castle Park Lending LLC

Enter new principal office address, if applicable: No Change

(Principal office address  
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: No Change

(Mailing address  
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M22000004569

3. Jurisdiction of its organization: DE

4. Date authorized to do business in Florida: March 2nd, 2022

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

5. New name of the limited liability company: Orbis Funding 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: No change

New Registered Office Address: No change

*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

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

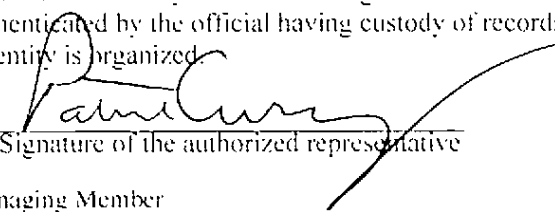
No change

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

No change

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> 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

Patrick Curry, Managing Member

Typed or printed name of signee

Filing Fee: \$25.00

RECEIVED  
TALLAHASSEE, FLORIDA

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FILED



# State of Delaware

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
P.O. BOX 898  
DOVER, DELAWARE 19903

8644563  
PATRICK CURRY  
4965 US HWY 42  
SUITE 1000  
LOUISVILLE, KY 40222

06-03-2022

ATTN: ORBIS FUNDING FORMERLY CASTLE PARK LENDING

DESCRIPTION	AMOUNT
5889235 - ORBIS FUNDING, LLC Entity Status - Short Form	
Certification Fee	\$50.00
Expedite Fee, Same Day	\$50.00
TOTAL CHARGES	\$100.00
TOTAL PAYMENTS	\$100.00
BALANCE	\$0.00

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "ORBIS FUNDING, 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 THIRD DAY OF JUNE, A.D. 2022.



5889235 8300

SR# 20222609952

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://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 in a small font.

Authentication: 203589816

Date: 06-03-22