

L020000027885

(Requestor's Name)



IDA C. OVIES, C.P.A., P.A.
2307 Douglas Road, Ste. 400
Miami, FL 33145

PICK-UP WAIT MAIL

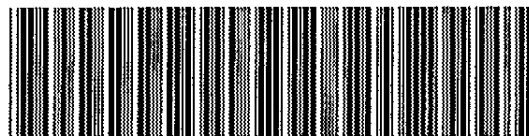
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:

UNITED TRUST CAPITAL, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

THE NAME OF THE LLC WAS INCORRECTLY
REPORTED. THE CORRECT NAME IS:
" UNITED CAPITAL TRUST, LLC "

OR

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction is as follows:

Dated: October 23, 2002

Luis Aparicio
Signature of a member or authorized representative of a member

MGR - LUIS APARICIO
Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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STATE OF FLORIDA
TALLAHASSEE

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L02000027885
FILED 8:00 AM
October 22, 2002
Sec. Of State

Article I

The name of the Limited Liability Company is:

UNITED TRUST CAPITAL, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

8390 W FLAGLER STREET
213
MIAMI, FL. US 33145

The mailing address of the Limited Liability Company is:

8390 W FLAGLER STREET
213
MIAMI, FL. US 33145

Article III

The name and Florida street address of the registered agent is:

IDA C OVIES
2307 DOUGLAS RD
400
MIAMI, FL. 33145

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: IDA C OVIES

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TALLAHASSEE, FLORIDA

Article IV

The name and address of managing members/managers are:

Title: MGR
LUIS APARICIO
8390 W FLAGLER STREET, STE 213
MIAMI, FL. 33144 US

Signature of member or an authorized representative of a member

Signature: LUIS APARICIO

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