L09000091084

Florida Department of State
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To:
Division of Corporations
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From:
Account Name : ROBERTS, SEWARD & COMPANY PA
Account Number : I20040000178
Phone : (813)225-1040
Fax Number : (813)221-3135

L. SELLERS
MAR 12 2009
EXAMINER

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

VICTORY FINANCIAL SERVICES LLC

Certificate of Status	0
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Estimated Charge	$25.00

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H09000056925 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

VICTORY FINANCIAL SERVICES LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 1/8/09 and assigned Florida document number L09000001084.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

736 BROADOAK LOOP
SANFORD, FL 32771

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

736 BROADOAK LOOP
SANFORD, FL 32771

B. If amending the registered agent and/or registered office 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: JORDAN KANTER

New Registered Office Address: 736 BROADOAK LOOP
(Enter Florida street address)

SANFORD, Florida 32771
(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 608, 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.

X
(If Changing Registered Agent, Signature of New Registered Agent)

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	CHRIS GOSLIN	1211 NORTH WESTSHORE BLVD #106 TAMPA, FL 33607	☐ Add ☑ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☑ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated 3/11, 2009.

X _____
Signature of a member or authorized representative of a member

Deborah E Kantor
Typed or printed name of signee

Page 2 of 2

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