

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 617-6383

L. SELLERS

MAR 12 2009

From:  
Account Name : ROBERTS, SEWARD & COMPANY PA  
Account Number : I20040000178  
Phone : (813) 225-1040  
Fax Number : (813) 221-3135

EXAMINER

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## VICTORY FINANCIAL SERVICES LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$25.00 |

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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 "LLC."

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

738 BROADOAK LOOP

SANFORD, FL 32771

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

738 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:

738 BROADOAK LOOP

(Enter Florida street address)

SANFORD

(City)

Florida 32771

(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.

(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

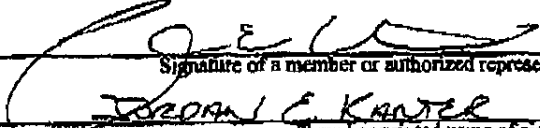
MGRM = Managing Member

| <u>Title</u> | <u>Name</u>  | <u>Address</u>                                    | <u>Type of Action</u>                                                      |
|--------------|--------------|---------------------------------------------------|----------------------------------------------------------------------------|
| MGRM         | CHRIS GOSLIN | 1211 NORTH WESTSHORE BLVD #105<br>TAMPA, FL 33807 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
|              |              |                                                   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |              |                                                   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |              |                                                   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |              |                                                   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |              |                                                   | <input type="checkbox"/> Add<br><input type="checkbox"/> 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  
Jordan E. Kante  
\_\_\_\_\_  
Typed or printed name of signee

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