

LO9 000079091

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

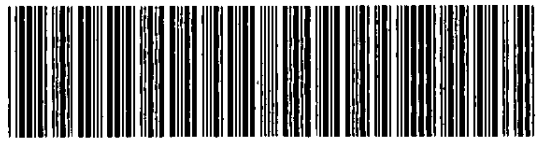
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DEC 17 2009

EXAMINER



100163534261

12/16/09--01006--010 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
09 DEC 16 PM 1:52

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Settlement Solutions Group, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hank Klein
Name of Person

Settlement Solutions Group, LLC
Firm/Company

351 N. Congress Avenue, Suite 127
Address

Boynton Beach, FL 33426
City/State and Zip Code

hklein@settlementsolutionsgroup.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hank Klein at (**561**) **306-0776**
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
09 DEC 16 PM 1:52

Settlement Solutions Group, 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 August 17, 2009 and assigned Florida document number L09000079091.

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:

351 N. Congress Avenue

(Principal office address MUST BE A STREET ADDRESS)

Suite 127

Boynton Beach, FL 33426

Enter new mailing address, if applicable:

351 N. Congress Avenue

(Mailing address MAY BE A POST OFFICE BOX)

Suite 127

Boynton Beach, FL 33426

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:

Hank Klein

New Registered Office Address:

351 N. Congress Avenue, Suite 127

Enter Florida street address

Boynton Beach

Florida

33426

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.



If Changing Registered Agent, Signature of New Registered Agent

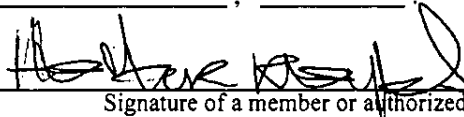
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Hank Klein	351 N. Congress Avenue Suite 127 Boynton Beach, FL 33426	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated December 11, 2009



Signature of a member or authorized representative of a member

Hector Reyes

Typed or printed name of signee