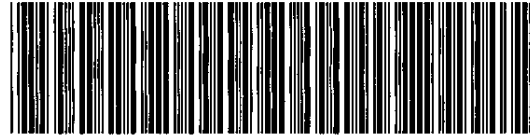


L10000116009

Anita McCray  
- 5462 Whitney St  
- Jacksonville, FL 32277



800239613968

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

09/17/12--01021--009 \*\*25.00

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2012 SEP 17 PM 12:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

McCray Tax & 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 8/27/2012 and assigned Florida document number L10000116009.

This amendment is submitted to amend the following:

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

A + A Income Tax and Financial Services LLC  
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)**

Same

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

Same

**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:

Same

New Registered Office Address:

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 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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AUG 27 2012  
TALLAHASSEE  
STATE  
SECRETARY  
171  
PM 2:34

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>
		Same	<input type="checkbox"/> Add <input type="checkbox"/> Remove
		Same	<input type="checkbox"/> Add <input type="checkbox"/> Remove
		Same	<input type="checkbox"/> Add <input type="checkbox"/> Remove
		Same	<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 9-14-2012

*Anta McCray*  
Signature of a member or authorized representative of a member

Anta McCray  
Typed or printed name of signee

SEP 17 PM 2:01  
 CLERK OF STATE  
 LAWRENCE, MISSISSIPPI

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