

L11000133983

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Your Entity Solution, LLC
6440 Sky Pointe Drive, Suite 140-106
Las Vegas, NV 89131

Direct (702) 506-0190
Fax (815) 301-3015

December 2, 2011

Florida Secretary of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Madam or Sir,

Enclosed please find check number 6227 in the amount of \$25.00 for the Articles of Amendment to the Articles of Organization of Equity Capital Enterprises, LLC. Also enclosed is an extra copy of the Articles of Amendment to the Articles of Organization.

Please mail the Filed Stamped Copy of our Document to the following address:

**Your Entity Solution, LLC
6440 Sky Pointe Dr Ste 140-106
Las Vegas NV 89131**

Thank you for your time and consideration.

Sincerely,

Your Entity Solution, LLC

Kylie Kearns
702-506-0197 office
702-938-7280 facsimile
Kylie@yourentitysolution.com

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TALLAHASSEE FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: EQUITY CAPITAL ENTERPRISES, 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:

KYLIE KEARNS
Name of Person
YOUR ENTITY SOLUTION, LLC
Firm/Company
6440 SKY POINTE DR., STE 140-106
Address
LAS VEGAS, NV 89131
City/State and Zip Code
KYLIE@YOURENTITYSOLUTION.COM
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA
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For further information concerning this matter, please call:

KYLIE KEARNS at (**702**) **506-0197**
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**

EQUITY CAPITAL ENTERPRISES, 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 November 28, 2011 and assigned Florida document number L11000133983.

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)

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TALLAHASSEE, FLORIDA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: _____

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

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>
MGR	YANILA NINO	1200 WEST AVE., APT 924 MIAMI BEACH, FL 33139	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated December 2, 2011

Kylie Kearns
 Signature of a member or authorized representative of a member

KYLIE KEARNS
 Typed or printed name of signee