

M04000004876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

M04-4876

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

1

Office Use Only



500106491305

08/23/07--01001--009 \*\*11.25

08/16/07--01019--026 \*\*49.75

FILED  
07 AUG 22 PM 4:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AmeriFirst National Financial of Venice L.L.C.  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Boesch  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

2536 Countryside Blvd., 6th Floor  
(Address)

Clearwater FL 33763  
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Boesch at ( 727 ) 726-0726  
(Name of Person) (Area Code & Daytime Telephone Number)

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

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

**Enclosed is a check for the following amount:**

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 17, 2007

MICHAEL BOESCH  
2536 COUNTRYSIDE BLVD. 6TH FLOOR  
CLEARWATER, FL 33763

SUBJECT: AMERIFIRST NATIONAL FINANCIAL OF VENICE, LLC  
Ref. Number: M04000004876

We have received your document for AMERIFIRST NATIONAL FINANCIAL OF VENICE, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan  
Document Specialist

Letter Number: 007A00050189

*Glenda  
1-800-458-7112*

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-3 must be completed)**

1. Name of limited liability company as it appears on the records of the Florida Department of State: AmeriFirst National Financial of Venice, L.L.C.

2. Jurisdiction of its organization: Delaware

3. Date authorized to do business in Florida: November 9, 2004

**SECTION II (4-7 complete only the applicable changes)**

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? August 14, 2007

5. New name of the limited liability company: Interstate First Financial of Venice L.L.C.  
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

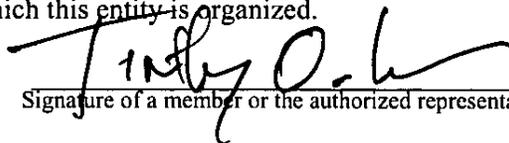
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration:

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of a member or the authorized representative of a member

Timothy O. North

Typed or printed name of signee

**Filing Fee: \$25.00**

07 AUG 22 PM 4:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "AMERIFIRST NATIONAL FINANCIAL OF VENICE, LLC", CHANGING ITS NAME FROM "AMERIFIRST NATIONAL FINANCIAL OF VENICE, LLC" TO "INTERSTATE FIRST FINANCIAL OF VENICE, L.L.C.", FILED IN THIS OFFICE ON THE FOURTEENTH DAY OF AUGUST, A.D. 2007, AT 11:30 O'CLOCK A.M.

3844511 8100

070918813



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5924211

DATE: 08-14-07

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 11:30 AM 08/14/2007  
FILED 11:30 AM 08/14/2007  
SRV 070918813 - 3844511 FILE

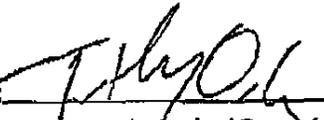
**STATE OF DELAWARE  
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: AMERIFIRST NATIONAL  
FINANCIAL OF VENICE, L.L.C.

2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The Name of the L.L.C. shall be changed to:  
Interstate First Financial of Venice, L.L.C.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 14th day of August, A.D. 2007.

By:   
Authorized Person(s)

Name: Timothy O North L.L.C. Mgr  
Print or Type