

L07000009/844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500133124055

07/21/08--01016--003 **30.00

FILED
08 AUG -8 AM 9:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

AUG 11 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MIRE 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:

STEPHEN PARNELL
(Name of Person)

LYNXBANC GROUP LLC
(Firm/Company)

1700 SW 12 AVENUE, SUITE C
(Address)

BOCA RATON, FL 33486
(City/State and Zip Code)

For further information concerning this matter, please call:

STEPHEN PARNELL at (561) 392-8044 x1.7
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 AUG -8 PM 12:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 23, 2008

STEPHEN PARNELL
1700 SW 12 AVE
STE C
BOCA RATON, FL 33486

SUBJECT: MIRE GROUP LLC
Ref. Number: L07000091844

We have received your document for MIRE GROUP LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 308A00042698



OFFICE OF FINANCIAL REGULATION

DON B. SAXON
COMMISSIONER

**FINANCIAL SERVICES
COMMISSION**

CHARLIE CRIST
GOVERNOR

BILL MCCOLLUM
ATTORNEY GENERAL

ALEX SINK
CHIEF FINANCIAL OFFICER

CHARLES BRONSON
COMMISSIONER OF
AGRICULTURE

July 31, 2008

Mr. Steve Parnell
1700 S.W. 12th Avenue, Suite C
Boca Raton, FL 33486

Dear Parnell:

Re: LynxBanc Real Estate, LLC
LynxBanc Investments, LLC

Reference is made to your recent request for approval of the use of the above-referenced names.

The use of the words "bank," "banco," "banque," "banker," "banking," "trust company," "savings and loan association," "savings bank," "credit union," or words of similar import, by any person other than a bank or trust company, in any context or in any manner which indicates or reasonably implies that the business being conducted or advertised is that of a bank or trust company or holding company is prohibited by Section 655.922, Florida Statutes.

This Office has previously approved the use of the words "bank" or "trust company" by non-banking companies where they are used in connection with other words which serve to distinguish the type of business being conducted from that of a bank, trust company or holding company.

Since the above-referenced names does not provide any descriptive distinction sufficient to avoid the implication that the nature of the business is that of a banking corporation, domestic /international banking office, or credit union, we are unable to approve your request for use of the above-referenced names.

Should you wish to resubmit another name or change your choice of names to clearly indicate that your company is not a commercial bank, holding company, savings and loan, credit union, or subsidiary thereof, we will be glad to give it consideration.

Sincerely,

Linda B. Charity
Director

LBC:bk

cc: Karon Beyer - Chief, Bureau of Commercial Recordings, Division of Corporations, Department of State

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

08 AUG -8 AM 9:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MIRE 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 9/10/2007 and assigned
Florida document number L07000091844

This amendment is submitted to amend the following:

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

LYNXBANC INVESTMENTS 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)

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)

(City), Florida (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

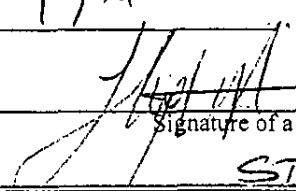
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<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.)*

08 AUG - 8 AM 9:54
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated JULY 17th 2008



Signature of a member or authorized representative of a member
STEPHEN PARNELL

Typed or printed name of signee