

F09000001123

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 DEC 11 PM 1:33

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DEC 15 2009

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Mutual Fund Investors Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** F09000001123

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter W. Fink  
Name of Contact Person

Lynch, Brewer, Hoffman & Fink, LLP  
Firm/Company

101 Federal Street, 22nd Floor  
Address

Boston, MA 02110  
City/State and Zip Code

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

For further information concerning this matter, please call:

Peter W. Fink at ( 617 ) 951-0800  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

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| <input type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
|---|---|---|---|

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

(Pursuant to s. 607.1504, F.S.)

## SECTION I

(Document number of corporation (if known))

- (Name of corporation as it appears on the records of the Department of State)

## SECTION II

- its jurisdiction of incorporation? December 4, 2009

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

business in Florida)

- (New duration)

(New jurisdiction)

90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Eric M. Kobren

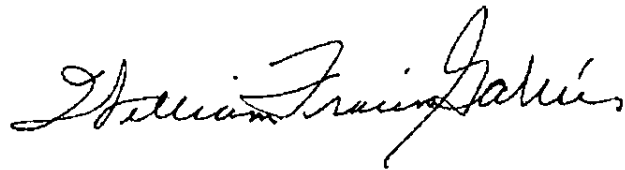
**President**

THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are

deemed to have been filed with me on:

December 04, 2009 12:08 PM

A handwritten signature in cursive script, reading "William Francis Galvin".

WILLIAM FRANCIS GALVIN

*Secretary of the Commonwealth*

D  
PC

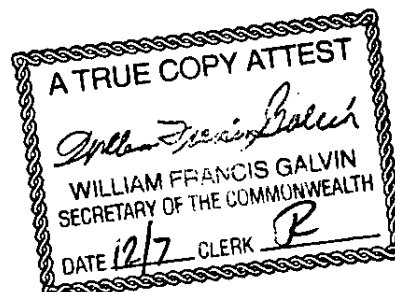
**The Commonwealth of Massachusetts**  
William Francis Galvin  
Secretary of the Commonwealth  
One Ashburton Place, Boston, Massachusetts 02108-1512

FORM MUST BE TYPED

**Articles of Amendment**  
(General Laws Chapter 156D, Section 10.06; 950 CMR 113.34)

FORM MUST BE TYPED

- (1) Exact name of corporation: Mutual Fund Investors Association, Inc.
- (2) Registered office address: 20 William Street, Suite 200, Woblesley Hills, MA 02481  
(number, street, city or town, state, zip code)
- (3) These articles of amendment affect article(s): 1  
(specify the number(s) of article(s) being amended (I-VI))
- (4) Date adopted: December 2, 2009  
(month, day, year)
- (5) Approved by
- (check appropriate box)
- ☐ the incorporators.
- ☐ the board of directors without shareholder approval and shareholder approval was not required.
- ☒ the board of directors and the shareholders in the manner required by law and the articles of organization.
- (6) State the article number and the text of the amendment. Unless contained in the text of the amendment, state the provisions for implementing the exchange, reclassification or cancellation of issued shares.
1. The name by which the corporation shall be known is:
- Luca Liquidating Corp.



To change the number of shares and the par value, \* if any, of any type, or to designate a class or series, of stock, or change a designation of class or series of stock, which the corporation is authorized to issue, complete the following:

Total authorized prior to amendment:

WITHOUT PAR VALUE		WITH PAR VALUE		
TYPE	NUMBER OF SHARES	TYPE	NUMBER OF SHARES	PAR VALUE

Total authorized after amendment:

WITHOUT PAR VALUE		WITH PAR VALUE		
TYPE	NUMBER OF SHARES	TYPE	NUMBER OF SHARES	PAR VALUE

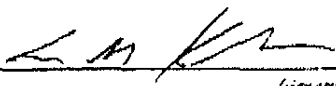
(7) The amendment shall be effective at the time and on the date approved by the Division, unless a later effective date not more than 90 days from the date and time of filing is specified: \_\_\_\_\_

12/04/2009 12:12 FAX 6179510811

LYNCHBREWER

004/005

Signed by: \_\_\_\_\_



*(signature of authorized individual)*

- ☐ Chairman of the board of directors.
- ☒ President.
- ☐ Other officer.
- ☐ Court-appointed fiduciary.

on this 2nd day of December, 2009