# L02000032103

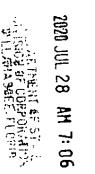
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### **COVER LETTER**

	Registration Se Division of Cor				
end ir.	South Flor	ida Acceptance Company, L	LC		
SUBJEC	· ,	Name of Lim	ited Liability Company		
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retu	arn all correspo	South Florida Acceptance Company, LLC  Name of Limited Liability Company  d Articles of Amendment and fee(s) are submitted for filling.  n all correspondence concerning this matter to the following:  Noel Ackbersingh  Name of Person  South Florida Acceptance Company, LLC  Firm/Company  2020 NW 150th Ave Suite 100  Address  Pembroke Pines FL 33028  City/State and Zip Code  n.ackbersingh@s-fac.com  E-mail address: (to be used for future annual report notification)  Information concerning this matter, please call:  arsingh  Name of Person  Name of Person  Daytime Telephone Number  a check for the following amount:			
		Noel Ackbersingh			
			Name of Person		
		South Florida Acceptant	e Company, LLC		
Firm/Company					
2020 NW 150th Ave Suite 100					
			Address		
		Pembroke Pines FL 330	28		
			City/State and Zip Code	<del></del>	
For furthe	r information c			etification)	
Noel Ack				)	
		f Person			
Enclosed:	is a check for th	ne following amount:			
■ \$25.0	0 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	
	Hailing Addres		<u>Street Address:</u> Registration S	Section	
[	Division of C	orporations	Division of C	orporations	
	P.O. Box 632 Fallahassee, l		The Centre of 2415 N. Mon	Tallahassee roe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### SOUTH FLORIDA ACCEPTANCE COMPANY, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Limited	Liability Company)	28			
The Articles of Organization for this Limited Liability Company	were filed on 12/02/2002	and as ined			
Florida document number L02000032103		7980 7			
This amendment is submitted to amend the following:		3			
A. If amending name, enter the new name of the limited liab	amend the following:    Le new name of the limited liability company here:   and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC."     Aress, if applicable:   South Florida Acceptance Company, LLC     2020 NW 150th Ave, Suite 100     Pembroke pines FL 33028     Applicable:   DST OFFICE BOX)     agent and/or registered office address on our records, enter the name of the new registered office address here:				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or tl	ne abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	South Florida Acceptance Compa	any, LLC			
(Principal office address MUST BE A STREET ADDRESS)	2020 NW 150th Ave, Suite 100				
	Pembroke pines FL 33028				
Enter new mailing address, if applicable:					
(Muiling address MAY BE A POST OFFICE BOX)					
	<del></del>				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	name of the new registered			
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
	, Florida	Zip Code			
	CHy	гір Соае			

#### 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
- AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
PRES	Lloyd Gill	1982 North State Road 7	□Add
		Margate, FL 33063	<b>≣</b> Remove
		<del></del>	□Change
PRES	Richard W Helber	3050 Corporate Way	□Add
		Miramar FL 33025	□Remove
SEC	Stephen O Spooner	1982 North State Road 7	<b>≡</b> Add
		Margate FL 33063	□Remove
			□Change
<del></del>			□Add
		<del></del>	□Remove
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no alliantiam due de l'est l	e specific and cannot k does not meet the	be prior to date of file applicable statute	ing or more than 90	days after filing.) Pursi	uant to 605.0207
on enecuve date is listed, the date must be one: If the date inserted in this block	artment of State's r	ecords.	a) ming requiren	icins, this date will i	iot oc fisted as
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ocument's effective date on the Department's effective date on the Department's effective date on the Department's effective of is filed.			l a.m. on the earl	ier of: (b) The 90th	n day after the
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record specifies a delayed effective of its filed.  July 16th, ated	late, but not an effe		/		n day after the

Filing Fee: \$25.00