

L04000004572

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : MIT PRODUCTS AND SERVICE, INC.  
Account Number : 070402002741  
Phone : (305) 597-5190  
Fax Number : (305) 597-5189

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
USA FINANCIAL PROTECTION AND SERVICES, L.L.C.

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T. HAMPTON

EXAMINER



September 22, 2008

FLORIDA DEPARTMENT OF STATE

Division of Corporations

USA FINANCIAL PROTECTION AND SERVICES, L.L.C.  
3399 NW 72ND AVE, STE 209-A  
MIAMI, FL 33122

SUBJECT: USA FINANCIAL PROTECTION AND SERVICES, L.L.C.  
REF: L04000004572

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

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Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

FAX Aud. #: H08C00218720  
Letter Number: 108A00050958

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: USA FINANCIAL PROTECTION AND SERVICES 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:

YELISSA CASTELLO FERNANDEZ  
(Name of Person)

MIT PRODUCTS AND SERVICES INC  
(Firm/Company)

3389 NW 72ND AVE STE 208 A  
(Address)

MIAMI FLORIDA 33122  
(City/State and Zip Code)

For further information concerning this matter, please call:

YELISSA CASTELLO FERNANDEZ at ( 786 ) 252 0049  
(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

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

USA FINANCIAL PROTECTION AND SERVICES, L.L.C.

*(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 01/18/2004 and assigned Florida document number LD4000004672

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:

12605 NW 7 STREET

*(Principal office address MUST BE A STREET ADDRESS)*

MIAMI FLORIDA 33182

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:

YELISSA CASTELLO FERNANDEZ

New Registered Office Address:

12605 NW 7 STREET

*(Enter Florida street address)*

MIAMI

*(City)*

Florida 33182

*(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.*

*Yelissa Castello Fernandez*  
*(Changing Registered Agent, Signature of New Registered Agent)*

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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

Title	Name	Address	Type of Action
MGRM	RAFAEL MOREL	12805 NW 7 STREET MIAMI FLORIDA 33182	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	JUAN J MOREL	12805 NW 7 STREET MIAMI FLORIDA 33182	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	YELISSA CASTELLO FERNANDEZ	12805 NW 7 STREET MIAMI FLORIDA 33182	<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

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

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Dated 9/18/08

*Yelissa Castellon Fernandez*  
Signature of a member or authorized representative of a member

YELISSA CASTELLO FERNANDEZ

Typed or printed name of signer

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