L0400054119

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only State / Eps. Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Certified Copies
Special Instructions to Filing Officer:

Office Use Only



300056555243

08/10/05--01016--004 **30.00

SECRETARY TO AHII: 49

TRANSMITTAL LETTER

TO: Reg Divi	istration Section ision of Corporations		
SUBJECT:	FUNDING CHANNEL, LLC		
	(Name of L	imited Liability Company)	
	Articles of Amendment and fee(s) are su	-	
Please return	all correspondence concerning this matte	er to the following:	
	DONNA S. MANSFIELD		
	((Name of Person)	
	FUNDING CHANNEL, LLC		
		(Firm/Company)	
	4479 OAK TERRACE DRIVE		
		(Address)	
	GREENACRES, FL 33463		
	(City	y/State and Zip Code)	
For further in	nformation concerning this matter, please	call:	
DC	NNA MANSFIELD	_ ai()_	592-2570
	(Name of Person)	(Area Code &	Daytime Telephone Number)
Enclosed is a	check for the following amount:		
□ \$25.00 Fili	ng Fee Ø \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc	Sectificate of Status & Certificate Copy (additional copy is enclosed)

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	FUNDING CHANNEL, LLC		
_	(Present Name) (A Florida Limited Liability Company)	_	
FIRST:	The Articles of Organization were filed on 7/21/2004 and assigned document number L04000054119 .		
SECOND:	The following amendment(s) to the Articles of Organization was/were adopted by the liability company:	imited	
	A. THE ADDITION OF A NEW MANAGER/MEMBER, WHICH IS:		
	CARL WELLIVER 10 FOREST STREET WINCHESTER, MA 01890	_	<u> </u>
		05 AUG 10 AM11: 49	SECRETARY OF S
Dated AUC	Signature of a member or authorized representative of a member	H: 49	STATE ORATIONS
	Donna S. Mansfield		
	Typed or printed name of signee		

Filing Fee: \$25.00