5000054846

. .	•
	(Requestor's Name)
	(Address)
•	(dailees)
	(Address)
,	(City/State/Zip/Phone #)
•	
PICK-U	P WAIT MAIL
	· — —
•	
	(Business Entity Name)
1273	
	(Document Number)
* 5.	
Certified Copies	Certificates of Status
ootiiileä oobies ——	
· .	•
Special Instruction	s to Filing Officer:
	ALLINT
	A. LUNT
	AUG -9 2010
· · · · · · · · · · · · · · · · · · ·	EXAMINER
	EXMINITE: 1

Office Use Only



400183973524

08/06/10--01017--018 **30.00

COVER LETTER

Radstration Section

Division	oi Corporations	•						
SUBJECT:	Financ	ial Harvest	t, LLC		•			
•	Name of Li	mited Liability C	Company					
-		.•	•					
The enclosed Artic	cles of Amendment and fee(s) are s	submitted for fili	ng.					
· · · · · · · · · · · · · · · · · · ·			•	•				
Please return an C	orrespondence concerning this mat	iei to the followi	ng.					
•								
	·	David A. Witter						
		Name of Person						
		Financial Harvest, LLC						
•	***************************************	Firm/Company						
- ,								
•		1009 Chichester Street			74 20			
:		Addr	ess		L CO			
		Orlando, FL 32803						
	circy.	Orlando, FL 32803 City/State and Zip Code						
		City/State and Zip Code david@davidwitter.com						
. :	E-mail address	s: (to be used for fi	uture annual report no	otification)	PM 3: 1			
For further inform	nation concerning this matter, pleas	e call:		:	ララ コ			
	•		į	•	٠٠ - المعلود			
	David A. Witter	at (407	310-8870				
	Name of Person		Area Code & Day	time Telephone Number	T .			
		•	٠					
Enclosed is a chec	ck for the following amount:				• •			
		Tess on	Eiling Eoo R	□ \$60.00 Fi	ling Pag			
\$25.00 Filing	Fee \$\sum \$30.00 Filing Fee & Certificate of Status		Filing Fee & ied Copy		ate of Status &			
3	common or status		ional copy is enclo					
			••		nal copy is enclosed)			
<u> </u>								
	•		•	,				
	MAILING ADDRESS:	1		RIER ADDRESS:	-			
	Registration Section	•	Registration Se					
•	Division of Corporations		Division of Cor					
• •	P.O. Box 6327		Clifton Building					
	Tallahassee, FL 32314 .		2661 Executive Tallahassee, FL					
•			, , ,	· · · · · · · · · · · · · · · · · · ·				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Financial Ha	rvest, LLC				
(Name of the Limited (A	Liability Compar Florida Limited L	i <mark>y as it now appe</mark> r iability Company)	ers on our records.			
The Articles of Organization for this Limited Li	were filed on	06/02/2005	and assigned			
Florida document numberL05000054	1846					
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name of	the limited liabi	lity company he	re:			
			f	2010		
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ted Liability Comp	pany," the designation "	III O		
Enter new principal offices address, if applic	able:	831 West M	orse Boulevard	SS 25		
(Principal office address MUST BE A STREE	T ADDRESS)	Winter Park,	FL 32789	E C C		
	• •		* ; ,			
Enter new mailing address, if applicable:		831 West Morse Boulevard Winter Park, FL 32789				
(Mailing address MAY BE A POST OFFICE	BOX)					
		4				
B. If amending the registered agent and/or the new registered of			our records, enter	the name of the nev		
	٠.					
Name of New Registered Agent:	tter	·	•			
New Registered Office Address:	831 West M	orse Boulevar	rd ·			
	•	. ·E	nter Florida street ad	dress		
•	W	/inter Park	, Florida	32789		
		City	· · · · · · · · · · · · · · · · · · ·	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 Type of Action Title . Address <u>Name</u> MGRM David A. Witter 1009 Chichester Street ∏Add Orlando FL 32803 Remove Nancy K. Witter MGRM Add Remove 1009 Chichester Street Orlando, FL 32803 Add Remove ∴ Add, □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) For two managing member, just updating address. For second MGRM, Nancy K. Miller changed her name to Nancy K. Witter Dated Signature of a member or authorized representative of a member David A. Witter Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00