# L05000109700

(Address)	200112607992	
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	11/30/0701023010 **60.00	
(Document Number)  Certified Copies Certificates of Status		
Special Instructions to Filing Officer:	SECRE DIVISION <b>07 DEC</b>	

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## **COVER LETTER**

TO: Registration So Division of Con			
SUBJECT:	Bianchi Corp Financial LLC		
	(Name of Limited Liability Company)		
The enclosed Articles of	Amendment and fee(s) are submitted for filing.		
Please return all correspondence	ondence concerning this matter to the following:		
	Isabel Bianchi		
	(Name of Person)		
	Bianchi Corp Financial LLC		
(Firm/Company)			
	2900 Glades Circle Suite 500		
	(Address)		
	Weston Fl. 33327		
	(City/State and Zip Code)		
For further information c	oncerning this matter, please call:		
Isabel Bianchi	at ( 954 ) 793-2848  Of Person)  (Area Code & Daytime Telephone Number)		
(Name	of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & ✓ \$60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  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



### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 3, 2007

ISABEL BIANCHI 2900 GLADES CIR STE 500 WESTON, FL 33327

SUBJECT: BIANCHI CORP FINANCIAL, LLC

Ref. Number: L05000109700

We have received your document for BIANCHI CORP FINANCIAL, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORP." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Letter Number: 207A00068227

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

07 DEC 14 PM 4: 20
SECURETARY OF STATE
TALLASSEE FLORIDA

Division of Corporations - P.O. ROY 6397 - Tallahassaa, Florida 39314

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AKII	CLES OF ORGANIZATION	DIVIS <b>07</b>
	OF	SECRE VISION
B	ianchi Corp Financial LLC	14 PF
(Name of the Limited	Liability Company as it now appears on our records	<del>,                                     </del>
(A	Liability Company as it now appears on our records Florida Limited Liability Company)	A A DRAPO
The Articles of Organization for this Limited Li	ability Company were filed on 11/14/2005	and assigned
Florida document number L05000109700		<b>3</b> 5
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
Isabel B	Bianchi Enterprises, LLC	
	Bianchi Enterprises, LLC h the words "Limited Liability Company," the designat	ion "LLC" or the abbreviation
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Company," the designat or registered office address on our records, en	
The new name must be distinguishable and end wit "L.L.C."  B. If amending the registered agent and/or the new registered of	h the words "Limited Liability Company," the designat or registered office address on our records, en	
The new name must be distinguishable and end wit "L.L.C."  B. If amending the registered agent and/or the new registered of	h the words "Limited Liability Company," the designat or registered office address on our records, enfice address here:	nter the name of the new
The new name must be distinguishable and end wit "L.L.C."  B. If amending the registered agent and/or registered agent and/or the new registered of Name of New Registered Agent:	h the words "Limited Liability Company," the designat or registered office address on our records, en	nter the name of the new
The new name must be distinguishable and end wit "L.L.C."  B. If amending the registered agent and/or registered agent and/or the new registered of Name of New Registered Agent:	h the words "Limited Liability Company," the designat or registered office address on our records, enfice address here:	eet address)

### 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

<u>itle</u>	<u>Name</u>	Address	<u>Ty</u>	pe of Action
				Add Remove
). If amen	nding any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)	_	SECRETARY OF STATE DIVESION OF CORPORATIONS
— Dated <u>Dec</u>	Signature of a men	Documents of a member and a signed or printed name of signee	(c) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	

Page 2 of 2

Filing Fee: \$25.00