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MAY 3 0 2012 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corpo	
SUBJECT: G	annotti Home Builders, LCC Name of Limited Liability Company
The enclosed Articles of An	nendment and fee(s) are submitted for filing.
Please return all correspond	ence concerning this matter to the following
·	Christian Giannotti
	Name of Person
	FrayCompany
	, ·
	70 Box 1445
	Address
	Oak Park IL 60304
	POBOX 1445 Address Oak Pack IL 60304 City/State and Zip Code Cgianno Hie amail-com E-mail address. (to b) sed for future annual report notification)
	E-mail address. (to be seed for future annual report notification)
For further information con	cerning this matter, please call
Christ	an G. 1773 575-2100
Name of P	erson Area Code & Dayrime Telephone Number
Carlos da a da al Carlo	6.11
Enclosed is a check for the	lonowing amount
\$25.00 Filing Fee	\$30.00 Filing Fee & \$55.00 Filing Fee & \$560.00 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 Tallabassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clutton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

, ARTICLES C	OF
c. //.	
Giannoth	Home Builders UC
(<u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Con-	mpany were filed on $12/12/05$ and assigned
Florida document number 405000118	2166
This amendment is submitted to amend the following:	
A) If amending name, enter the new name of the limite	ed liability company here:
FINANCIAL RES	CUE & ASSOCIATES LLC.
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	:33)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or register	red office address on our records, enter the name of the ne
registered agent and/or the new registered office addre	ess here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Norida
New Registered Agent's Signature, if changing Registered	
 the provisions of all statutes relative to the proper and 	nd agree to act in this capacity. I further agree to comply with I complete pertormance of my duties, and I am familiar with an
 accept the obligations of my position as registered age 	ent as provided for in Chapter 608, F.S. Or, if this document is Loffice address, I hereby confirm that the limited liability
company has been notified in writing of this change.	confice dual ess. I never confirm that the limited liability
	If Changing Registered Agent, Signature of New Registered Agent
	Page 1 of 2
	9 cos

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 Address Type of Action Tit<u>le</u> **Name** II Group Holdings LLC. ☐ Add Remove Add Remove Add Remove ∐Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00