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(Requ	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	
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THE COUNTY -9 P 2: 43 ALSECRETARY OF STATE ALLAHASSEE. FLORIDA

## COVER LETTER

TO: Registration Division o	on Section f Corporations					;		
<sub>SUBJECT:</sub> Equ	ity Shield Solutions, LLC	<b>;</b>				}		
Sobolici:	(Name of Li	mited Liabilit	y Company)	<del></del>				
The enclosed Artic	es of Amendment and fee(s) are sul	bmitted for fil	ing.			- Andrews		
Please return all con	rrespondence concerning this matter	r to the follow	ing:					
	C. William Hider							
		Name of Person	1)		<del> </del>			
	Our on Ohn one Frondlin	- C						
	Green Stream Fundin	g Group, (Firm/Company				- 🛓		
	,	,r nnir Company	,			ALT SE	200	
	260 Rippling Lane					H RR		T
		(Address)				TAR A:SS	< 1	
	Winter Park, FL 327	<sup>7</sup> 89				4.03 40 A	7001 MAY -9 P	(T
	(City	/State and Zip (	Code)			STATE L'ORID	??	
For further informa	ation concerning this matter, please	call:				D A	2: 43	
C. Will	iam Hider	at (_	407	647-4	1777	:		
<del></del>	(Name of Person)		(Area Code	e & Daytime	: Telephone	: Number	)	
	for the following amount:	<b></b>	5W 23 6		<del>-</del>	00 500		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certifi	Filing Fee & ied Copy is conal copy is conal copy	enclosed)	Certified	ate of Sta	itus &	sed)
					<b>,</b>			ŕ
	MAILING ADDRESS:			T/COURII		RESS:		
	Registration Section Division of Corporations	Registration Section Division of Corporations						
}	P.O. Box 6327 Fallahassee, FL 32314	Clifton Building 2661 Executive Center Circle						

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

E	quity Shield Solutions, LLC		
	(Present Name) (A Florida Limited Liability Company)		
		i	
FIRST:	The Articles of Organization were filed on January 4, and assigne document number L06000001169	d	
SECOND	This amendment is submitted to amend the following:		
	Change Name to:		
	Green Stream Funding Group, LLC		
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Dated M	ay 7 2007		
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		1	
	- Chilliam trila		
	Signature of a member or authorized representative of a member		
	C. William Hider		
	Typed or printed name of signer	<del></del>	

Filing Fee: \$25.00