L0600013387

(Rec	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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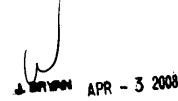


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DIVISION OF CORPORATIONS

08 MAY 1 L PM 3: 38



J. BRYAN

MAY 2 1 2008

EXAMINER

COVER LETTER

TO: Registration S Division of Co			,
SUBJECT: FAF (CAPITAL FUND 2006-1,	LLC	
SUBJECT:	(Name of Lim	nited Liability Company)	
	Amendment and fee(s) are sub	•	
	DALE ABBOTT		
		(Name of Person)	
	FAF_CAPITAL]	MANAGEMENT, LLC (Firm/Company)	
	2215 N.W. 36	TH STREET	80 Silver
		(Address)	D8 HAY
	MIAMI, FLORI	DA 33124	OF CO
		(City/State and Zip Code)	PH Y
For further information	concerning this matter, please of	call:	RY OF BLATIONS CORPORATIONS L PH 3: 38
DALE ABBOTT		at (305) 638-2010 EXT 212	
(Name	of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	e of Status &
Regis Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 trassee, 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

April 3, 2008

DALE ABBOTT FAF CAPITAL MANAGEMENT, LLC 2215 N.W. 36TH STREET MIAMI, FL 33124

SUBJECT: FAF CAPITAL FUND 2006-1, LLC

Ref. Number: L06000013387

We have received your document for FAF CAPITAL FUND 2006-1, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We didn't receive page (2) of application with member signature

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6043.

Letter Number: 608A00019751

Joey Bryan Regulatory Specialist II SECRETARY OF CORPORATIONS
OF CORPORATIONS
OF CORPORATIONS

FAF CAPITAL MANAGEMENT, LLC

May 13, 2008

Mr. Joey Bryan Regulatory Specialist II Florida Department of State Division of Corporation P.O. Box 6327 Tallahassee, Florida 32314

Dear Mr. Bryan:

Enclosed please find the completed application for the name change of FAF Capital Fund 2006-1 LLC.

Please let me know if any additional information is needed.

Thank you for your assistance.

Sincerely;

Tim Gamwell

FAF Capital Management LLC

SECRETARY OF STATE OF STATE OF CORPORATIONS

` ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited (A	Liability Company as it nov Florida Limited Liability Cor	v appears on our recompany)	ords.)	
The Articles of Organization for this Limited Li Florida document numberL06000013387	ability Company were filed	on JANUARY 31	, 2006	and assigned TETALY 14
This amendment is submitted to amend the follo	owing:			PH 3: 38
A. If amending name, enter the new name of	the limited liability comp	any here:		38 Qus
LMD AUTO FUND, LLC				
The new name must be distinguishable and end wit "L.L.C." B. If amending the registered agent and/or the new registered of	or registered office addre			•
Name of New Registered Agent:	RICK BETTELLI			
New Registered Office Address:	2215 N.W. 36TH	STREET		
New Registered Office Address:	2215 N.W. 36TH	(Enter Florida	street add	dress)
New Registered Office Address:	2215 N.W. 36TH	(Enter Florida	street add	dress) 33142

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

	Name	Address	Type of Acti
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			Remove
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amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	_
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			AY 14 PH 3: 38
	Q.20E) (3)	70

Page 2 of 2

Filing Fee: \$25.00