

206000070713

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(City/State/Zip/Phone #)

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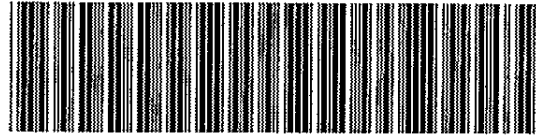
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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Professional Asset Recovery LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stacey Mattaliano

(Name of Person)

Professional Asset Recovery LLC

(Firm/Company)

14860 82nd Lane N

(Address)

Loxahatchee, FL 33470

(City/State and Zip Code)

For further information concerning this matter, please call:

Stacey Mattaliano

(Name of Person)

at (561) 644-4575
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
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

SECRET
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Professional Asset Recovery LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 7/10/2006 and assigned
document number LO6000070713

SECOND: This amendment is submitted to amend the following:

Manager/Member Detail: Please update the following. Thank you.

Stacey Mattaliano 14860 82nd Lane N, Loxahatchee, FL 33470 as the Pres/VP/Sec/Trea.

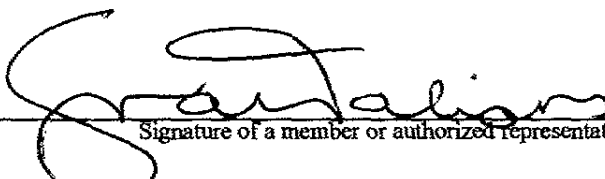
Also my EIN # is 20-5116855

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Dated July 21, 2006



Signature of a member or authorized representative of a member

Stacey Mattaliano

Typed or printed name of signer

Filing Fee: \$25.00