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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

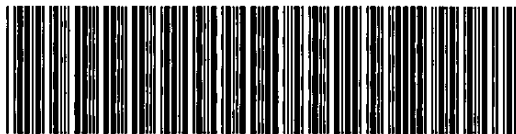
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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[Signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S Wilson Consulting & Financial Services, 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:

Sherrill Wilson
(Name of Person)

S Wilson Consulting & Financial Services, LLC
(Firm/Company)

18451 NW 37th Ave Apt 274
(Address)

Miami, FL 33056
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Sherrill Wilson at (786) 985-0020
(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
- \$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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

S Wilson Consulting & Financial Services, LLC

(Present Name)

(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 08/10/2006 and assigned document number L06000079209.

SECOND: This amendment is submitted to amend the following:

Change Registered Agent from Belinda Wilson at 1110 NW 122st Miami, FL 33056

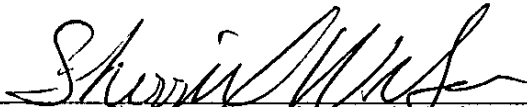
to Sherrill Wilson 18451 NW 37th Ave Apt 274 Miami, FL 33056. Add

Sherrill Wilson as manager.

I Sherrill Wilson is familiar with and accept
the obligations of the position.

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TALLAHASSEE, FLORIDA

Dated September 19, 2006



Signature of a member or authorized representative of a member

Sherrill Wilson

Typed or printed name of signee

Filing Fee: \$25.00