

L06000103806

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

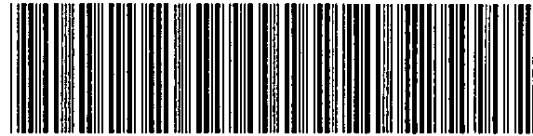
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

CP \$75.60



600130890776

07/09/08--01036--013 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL - 9 PM 3:06

W

108A00040733

B. Theobald JUL 10 2008



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 26, 2008

LUCY PALACIOS
M & L ENTERPRISES ACCOUNTING AND MORE IN
16969 NW 67 AVENUE SUITE #201
HIALEAH, FL 33015

SUBJECT: FRIAS FINANCING GROUP LLC
Ref. Number: L06000103806

We have received your document for FRIAS FINANCING GROUP LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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.

Joey Bryan
Regulatory Specialist II

Letter Number: 708A00038482

COVER LETTER

**TO: Registration Section ,
Division of Corporations**

SUBJECT: FRIAS YANET

(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:

Lucy Palacios

(Name of Person)

M & L ENTERPRISES ACCOUNTING AND MORE INC

(Firm/Company)

16969 NW 67 Avenue Suite # 201

(Address)

Hialeah, FL 33015

(City/State and Zip Code)

For further information concerning this matter, please call:

LUCY PALACIOS

(Name of Person)

at (305) 623-7093

(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**

FRIAS FINANCING GROUP LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL -9 PM 3:06

The Articles of Organization for this Limited Liability Company were filed on 10/25/2006 and assigned
Florida document number L06000103806.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

(Enter Florida street address)

_____, **Florida**

(City)

(Zip Code)

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)

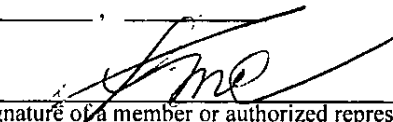
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	VICTOR A. GONZALES	250 CATALONIA AVENUE SUITE 807 CORAL GABLES, FL 33134	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	FRIAS YANET	1532 SIENA AVENUE CORAL GABLES, FL 33136	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	FRIAS YANET	1532 SIENA AVENUE CORAL GABLES, FL 33146	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____

X 

Signature of a member or authorized representative of a member
YANET FRIAS/MGR

Typed or printed name of signee