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SECRETARY OF STATE

T. CLINE

JAN 15 2008

EXAMINER

COVER LETTER

· TO:

TO: Registration Section Division of Corporations	
SUBJECT: FIRST REGIONAL FINANCIAL, 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:	
CHARLES H. SANFORD (Name of Person)	
(Firm/Company)	
3003 CARDINAL DRIVE, SUITE B	
(Address)	
VERO BEACH, FL 32963	
(City/State and Zip Code)	
For further information concerning this matter, please call:	200 SE
CHARLES H. SANFORD at (772) 492-1695	
(Name of Person) (Area Code & Daytime Telephone Number)	2006 JAN IN PMIZ:
מר. זיי,	
\$25.00 Filing Fee \$\sum \$\sum \text{\$\sum \text{\$\sin \text{\$\sum \text{\$\sin \text{\$\sum \text{\$\sum \text{\$\sum \text{\$\sin \sin \text{\$\sin \text{\$\sin \text{\$\sin \text{\$\sin \text{\$\sin \sin \text{\$\sin \text{\$\	atus & F
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	

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIRST REGIONAL FINANCIA	AL, LLC	
(<u>Name of the Limited L</u> (A F	iability Company as it now appears on our lorida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liab	oility Company were filed on APRIL 20	, 2007 and assigned
Florida document number <u>L07000042345</u>	·	
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
SENIOR ESTATE FINANCIAL, LLC		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the	designation "LLC" or the abbreviation
B. If amending the registered agent and/or		ords, enter the name of the new
registered agent and/or the new registered offic	<u>ce address here</u> :	IL PH 2:
Name of New Registered Agent:		
		Ora F
New Registered Office Address:	(Enter Flor	rida 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 = Ma $MGRM = 1$	anager Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Damova
			Damaya
	10.17		AddRemove
			Add Remove
			Add Remove
D. If amer	nding any other information, enter c	hange(s) here: (Attach additional she	ets, if necessary FOLD
_			
Dated JAN	Clan	2008 FACC	
	CHARLES H. SANFORD	ember or authorized representative of a me	ember say

Page 2 of 2

Filing Fee: \$25.00