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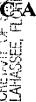
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6/23/2008

Fax Audit No. H08000157952 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Washington Square Financial, L			~ ~ ~ ~ =
(Name of the Limited	Liubility Compar	ny as it now appears on our records.) iability Company)	
(**	i i fortuu Diiffica D	tabinty Company)	
The Articles of Organization for this Limited L	iability Company	were filed on May 18, 2007	and assigned
Florida document number L07000053651	, -		Harris Harris
1 Totala dobation nontro	··································		77/20 00
			53 80
This amendment is submitted to amend the following	owing:		温 22
A. If amending name, enter the new name o	f the limited liab	ility company here:	12
,			
The new name must be distinguishable and end wi	th the words "I imi	ted Liability Company " the designation	n "LC" or the abbreviation
"L.L.C."	in the words 15mm	de diagnity Company, the congitation	,, may by min motorificon
with the state of	-1.1	701 Park of Commerce Blvd. St	ita 301
Enter new principal offices address, if applicable:		701 Park of Commerce Bivd., Suite 301	
(Principal office address MUST BE A STREE	TADDRESS)	Boca Raton, FL 33487	. M
•			
Enter new mailing address, if applicable:		701 Park of Commerce Blvd., Suite 301	
(Malling address MAY BE A POST OFFICE	вох)	Boca Raton, FL 33487	
B. If amending the registered agent and/ registered agent and/or the new registered o			er the name of the new
Name of New Registered Agent:	Jonathan Neu	man	
Name of New Registered Agent: New Registered Office Address:		commerce Blvd., Suite 301	t address)
	701 Park of C	ommerce Blvd., Suite 301 (Enter Florida stree	
		ommerce Blvd., Suite 301 (Enter Florida stree , Florid	33487
New Registered Office Address:	701 Park of C	ommerce Blvd., Suite 301 (Enter Florida stree , Florid: (City)	
	701 Park of C	ommerce Blvd., Suite 301 (Enter Florida stree , Florid: (City)	33487
New Registered Office Address:	701 Park of C Boca Raton Registered Agent: ed agent and agr proper and complistered agent as registered office change.	commerce Blvd., Suite 301 (Enter Florida stree , Florida (City) ree to act in this capacity. I further elete performance of my duties, and provided for in Chapter 608, F.S. address, I hereby confirm that the	a 33487 (Zip Code) r agree to comply with d I am familiar with and Or, if this document is e limited liability

Fax Audit No. H08000157952 3

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:

<u> Fitle</u>	Name	Address	Type of Action
			Add Remove
page and applicating to deliver the			Add Remove
D. If amei	ading any other information, enter chang	ge(s) here: (Attach additional sheets, if no	and the state of t
D. If ame 	ading any other information, enter chang	ge(s) here: (Attach additional sheets, if no	and the state of t
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