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B. BOSTICK
MAR 2 9 2011
EXAMINER

COVER LETTER

то:	Registration S Division of Co					
SUBJE	CT:					
		r: The Money Stop Center, LLC Name of Limited Liability Company				
The end	closed Articles o	of Amendment and fee(s) are su	bmitted for filing.			
Please r	return all corres	pondence concerning this matte	r to the following:			
·			Mark Jalali Name of Person			
			Name of Ferson			
The Money Stop Center LLC						
	Firm/Company					
	4120 Cleveland Ave #B-2					
Address					11 FACI	
Fort Myers FL 33901						
	City/State and Zip Code				MAR 28 CRIACE AHASSE	
	mbjmedia@comcast.net E-mail address: (to be used for future annual report notification)				mc.	
For furt	her information	e-mail address: (·	tion)	AH 9:45 OF STATE OF LORIDA	
		Mark Jaiali	at (239) 2	43-8641	0A	
	Name	of Person	Area Code & Daytime	l'elephone Number		
Enclose	d 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)	Certified	te of Status &	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tration Section ion of Corporations Box 6327	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	The Money Stop Center, L	LC			
(<u>Nar</u>	ne of the Limited Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)		_	
The Articles of Organization for	or this Limited Liability Company were filed on _	07/03/2007	and	assigr	ned
Florida document number	L07000069908				
This amendment is submitted t	to amend the following:				
A. If amending name, enter	the new name of the limited liability company h	<u>iere</u> :			
			≥ s		
The new name must be distinguis "L.L.C."	shable and end with the words "Limited Liability Con	npany," the designation '	'LLC'kor 1	<u> </u>	reviation
Enter new principal offices a	ddress, if applicable:		တွင်	82	471-1804
(Principal office address MUS	ST BE A STREET ADDRESS)		Me	722	
			FLORID	9	
			RE	÷.	
Enter new mailing address, i	f applicable:		Þ	O1	
(Mailing address MAY BE A					
			·····		
	red agent and/or registered office address or ew registered office address here:	ı our records, <u>enter</u>	the nam	e of t	the new
registered agent and/or the n	ew registered office address here.				
Name of New Registe	ered Agent:				
New Registered Office			<u> </u>		
		Enter Florida street address			
		, Florida			_
	City		Zip C	ode:	

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> **Address Type of Action MGRM** Kathy Jalali 4120 Cleveland Ave #B-2 ✓ Add Fort Myers FL 33901 Remove Remove ☐ Add Remove Rêmove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 15 2011 Dated ___ Signature of a member or authorized representative of a member Mark Jalali Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00