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EXAMINER



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COVER LETTER

TO: Registration Division of C		•	
SUBJECT:	Southern Cro	ss Financial Services	
	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.	
Please return all corres	spondence concerning this matter	r to the following:	
Karen Clark Name of Person			
		rn Cross Financial Services	
		Firm/Company	
1311 SW 1st Avenue Address			
		7 tuuress	2010 MAY 1 SECRETAL ALLAHAS
	Fo	rt Lauderdale FL 33315	HAY TAKE
		City/State and Zip Code	IZ PH
	E-mail address: (kvcclark@msn.com (to be used for future annual report notification	· · · · · · · · · · · · · · · · · · ·
For further informatio	n concerning this matter, please	call:	3: 52 STATE LORID.6
	Karen Clark	at (1 6558
Nam	e of Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check fo	r 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)
Reg Divi P.O.	ILING ADDRESS: istration Section ision of Corporations Box 6327 ahassee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Southern Cros	ss Financial Service	es LLC	
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appea Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	10/08/2007	and assigned
Florida document numberL07000102274			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		2010 MA
		\	
Enter new mailing address, if applicable:		ĄŚŚĘ	2 -
(Mailing address MAY BE A POST OFFICE BOX)		ָרָרָ רָרָ	
		S	
B. If amending the registered agent and/or registered agent and/or the new registered office ad		our records, enter t	
registered agent and/or the new registered office ad-	uress here.		
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:			
	Enter Florida street address		
	<i>C'</i>	, Florida	7: C - 1-
	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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR ≚ Manager MGRM = Managing Member

Name	<u>Address</u>	Type of Action
Kim Landeweer	1311 SW 1 th Avenue FT Lauderdale, FL 33308	☐ Add ☐ Remove
Ronald Koopman	6278 N. Federal Hwy # 630 FT Lauderdale , FL 33308	✓ Add Remove
Marlou Koopman	6278 N. Federal Hwy # 630 FT Lauderdale , FL 33308	
Raymundo Orlando G.	6278 N. Federal Hwy # 630 FT Lauderdale , FL 33308	✓ Add Remove
ing any other information, enter cha	nge(s) here: (Attach additional sheets, if necession	Address HAY Jad Bemove FOR 3: 52
Signature of a mem	ber or authorized representative of a member Karen Clark	
	Ronald Koopman Marlou Koopman Raymundo Orlando G. ing any other information, enter cha	Ronald Koopman 6278 N. Federal Hwy # 630 FT Lauderdale FL 33308

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Filing Fee: \$25.00