107000110180

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(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



400113386504

01/16/08--01016--003 **25.00

SECRETARY OF STATE SECRETARY OF CORPORATIONS

T. HAMPTON MAR 1 3 2008

EXAMINER

COVER LETTER

Registration Section
Division of Corporations

SUBJECT: ACT FINANCIAL SERVICE	ES LLC	
	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:	
DANIEL JOSEP	NU	•
DANIEL JOSEP	(Name of Person)	<u> </u>
•		·
ACT FINANCIA	L SERVICES LLC	
	(Firm/Company)	
901 S. MILITAR	Y TRAIL SUITE A-6	
	(Address)	
WEST PALM R	EACH, FL 33415	-
·	(City/State and Zip Code)	
·		
For further information concerning this matter, pl	lease call:	
DANIEL JOSEPH	at (561_) 633-3914	
(Name of Person)		
•		•
Enclosed is a check for the following amount:		
\$25.00 Filing Fee Certificate of Sta		\$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 Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle



RECEIVED
08 MAR 12 AM 10: 20

SECRETARY OF STATE TALLAHASSEE, FLORIDA

January 17, 2008

DANIEL JOSEPH 901 S. MILITARY TRAIL, SUITE A-6 WEST PALM BEACH, FL 33415

SUBJECT: ACT FINANCIAL SERVICES LLC

Ref. Number: L07000110186

We have received your document for ACT FINANCIAL SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 408A00003836

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ACT FINANCIAL SERVICES LLC

(Name of the Limited Lia	bility Company as it now appears on our records rida Limited Liability Company)	3 88
(A Fior	rida Limited Liability Company)	0,
The Articles of Organization for this Limited Liabili	ity Company were filed on 10/31/2007	and assigned
Florida document number <u>L07000110186</u>	:	
		:
This amendment is submitted to amend the followin	n g:	
		.]
A. If amending name, enter the new name of the	limited liability company here:	, 1
The new name must be distinguishable and end with the	words "Limited Liability Company," the designati	on "LLC" of the abbreviation
"L.L.C."		
B. If amending the registered agent and/or re	egistered office address on our records, <u>en</u>	ter the name of the new
registered agent and/or the new registered office	address here:	
		1
		`
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida street address)	
	, Florida	
_	(City)	(Zip Code)
		•
New Registered Agent's Signature, if changing Regis	tered 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 Type of Action **Title** <u>Name</u> **Address** 10454 GALLERIA **▼** Add **MGRM** MARSON SAM WELLINGTON, FL 33414 Remove RICOT TELCY MGMR 901 S. MILITARY TRAIL SUITE A-6 **✓** Add WELLINGTON, FL 33414 Remove Add Remove Add Remove \Box Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessor= 1 ADDRESS: 901 S. MILITARY TRAIL SUITE A-6 WEST PALM BEACH, FL 33415 Dated 12/29/2007 Signature of a member or authorized representative of a member

Typed or printed name of signee

DANIEL JOSEPH

Filing Fee: \$25.00

Page 2 of 2