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SECULIARY OF STATE

M. THOMAS
JAN 16 2009

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: Reverse	e Auto Loan LLC (Name of Lim	ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kwesi Callender		
		(Name of Person)	
	Sancal Investment & Fin	ancial Services Inc	
		(Firm/Company)	
	695 Cresta Circle		
		(Address)	
	West Palm Beach, Florid	a 33413	5 岩
		(City/State and Zip Code)	
For further information c	oncerning this matter, please c	all:	09 Jan 15 AM 19: 11 SECRETARISHER FLORIDA
Kwesi Callender		at (754) 422-1437	7
(Name o	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	S30.00 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)
MAIL	ING ADDRESS:	STREET/COURIER	ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Reverse Auto Loan LLC			
(<u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears on our records.) mited Liability Company)		
The Articles of Organization for this Limited Liability Cor	mpany were filed on December 10, 2007	and assigned	
Florida document number L07000122130			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u>(SS)</u>	08	
		超 与	
		宝书 二兴	
Enter new mailing address, if applicable:		题。	
•		The second	
(Mailing address MAY BE A POST OFFICE BOX)			
D. If amonding the registered agent and/or register	and office address on our records outs	jo . the name of the new	
B. If amending the registered agent and/or register registered agent and/or the new registered office address		the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
	, Florida		
	(City)	(Zin 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, <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

<u>Title</u>	<u>Name</u>	Address	Type of Action
Pres	George Theodule	8461 Lakeworth Road Suite 127 Lakeworth, Florida 33467	Add Remove
<u>VP</u>	Sandy Boswell-Callender	8461 Lakeworth Road Suite 127 Lakeworth, Florida 33467	Add Remove
MGRM	Sandy Boswell-Callender	8461 Lakeworth Road Suite 127	
		Lakeworth, Florida 33467	Remove
			Add G
			Add Remove
D. If ameno	ding any other information, enter ch	nange(s) here: (Attach additional sheets, if necessar	Remove
_			
_			
Dated Janua	ary 13 , 20	009	
	Signature of a me	mber or authorized representative of a member	
	Kwesi Callender		
		vned or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00