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| (Requestor's Name) |
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| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
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TALLAHASSEE, FLORIO

T. CLINE

SEP - 8 2008

EXAMINER

COVER LETTER

| TO: Registration S Division of Co | | | | | |
|-----------------------------------|---------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------|----------------|-----------------------|
| SUBJECT: REEF | FINANCIAL PARTN | ERS, LLC | | 0 | |
| | (Name of Lin | inted Liability Company) | | | |
| The enclosed Articles o | f Amendment and fee(s) are sui | omitted for filing. | | | |
| Please return all corresp | ondence concerning this matter | to the following: | | | |
| | STEFANIE L. SCHEFFE | | | | |
| | | (Name of Person) | | | |
| | REEF FINANCIAL PAR | TNERS, LLC | | | |
| · | | (Firm/Company) | | | |
| • | 275 TONEY PENNA DR | IVE, #1 | | | |
| | | (Address) | | | |
| | JUPITER, FL 33458 | | | TALLI TALLI | < 10.5 1 |
| | | (City/State and Zip Code) | -·· | SEP SEP | Name of Street |
| For further information of | concerning this matter, please of | all: | | 45 PA | Harris and the second |
| STEFANIE L SCHEFF | | at (561) 745-8191 | | 150 F | نسب أيأ |
| (Name | of Person) | (Area Code & Daytime T | elephone Number) | OF STATE | |
| Enclosed is a check for t | he 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 Certificate o Certified Co (additional c | f Status & | |

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited Lieb | ility Company as it now appears on our record | In V |
|-------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|--------------------------|
| (A Flori | ility Company as it now appears on our record ida Limited Liability Company) | <u>15.</u> , |
| The Articles of Organization for this Limited Liabilit | ty Company were filed on 12/19/2007 | and assigned |
| Florida document number L07000125552 | · | |
| This amendment is submitted to amend the following | j ' | |
| A. If amending name, enter the new name of the | limited liability company here: | |
| The new name must be distinguishable and end with the "L.L.C." | words "Limited Liability Company," the designa | i m iii |
| Enter new principal offices address, if applicable: | | CRETT SEP |
| Principal office address MUST BE A STREET AD | DDRESS) | |
| | ···· | 5 F 10: |
| Enter new mailing address, if applicable: | | GREE TO |
| Mailing address MAY BE A POST OFFICE BOX | 2 | |
| | | |
| B. If amending the registered agent and/or requestered agent and/or the new registered office a | | nter the name of the nev |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | (Enter Florida stra | eet address) |
| | | da |
| | (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</u>, <u>name</u>, <u>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> | <u>Address</u> | Type of Action |
|------------------------|---------------------------------------|--------------------------------------------------|-------------------------------------------------------|
| MGR | JOHN V. RANTINELLA, JR | 275 TONEY PENNA DRIVE, #1 JUPITER, FL 33458 | Add Remove |
| MGRM_ | JOHN V. RANTINELLA, SR | 275 TONEY PENNA DRIVE, #1 JUPITER, FL 33458 | Add Remove |
| MGRM | MICHAEL FURFARO | 275 TONEY PENNA DRIVE. #1 JUPITER, FL 33458 | Add Remove |
| | | | Add Remove SEP AddS Remove AddS Remove Remove |
| D. If amen | ding any other information, enter cha | nge(s) here: (Attach additional sheets, if neces | ssary.) |
| Dated AUGU | JST 1 2008 | B | ····· |
| | Signature of a memb | per or authorized representative of a member | |
| | JOHN V. RANTINELL | A, SR. | |

Page 2 of 2

Filing Fee: \$25.00