L080000 54546

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

Special Instructions to Filing Officer:

A. LUNT

DEC 19 2011

EXAMINER

Office Use Only



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COVER LETTER

| TO: Registration S Division of Co | | | | |
|-----------------------------------|---|---|--|---|
| | ≠ Florida Jud | gment Buyer, LLC | | |
| SUBJECT: | | ted Liability Company | | |
| | | | | |
| The enclosed Articles of | f Amendment and fee(s) are sul | omitted for filing. | | |
| Please return all corresp | ondence concerning this matter | to the following: | | |
| | Ro | ger Gladstone, Esquire | | |
| | | Name of Person | | |
| | Flori | da Judgment Buyer, LLC | | |
| | | Firm/Company | | |
| | 1499 W Pa | almetto Park Road, Suite 140 | 2011 DEC 1 | |
| | | Address | HASS | ļ |
| | E | oca Raton, FL 33486 | mile on pri | |
| | | City/State and Zip Code | | |
| | E-mail address: (| to be used for future annual report notifica | Orn en | |
| For further information | concerning this matter, please of | eall: | | |
| | A. Barara' | 504 | 16 1077 | |
| A. Poonai Name of Person | | at (561) 4 Area Code & Daytime 7 | 16-1077 Felephone Number | |
| | | | | |
| Enclosed 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) | \$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 ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| <u> </u> | <u>rida Judgment Buyer, LL0</u> | <u>C</u> | |
|--|--|--|-------------------------|
| (Name of the Limiter | d Liability Company as it now appear A Florida Limited Liability Company) | rs on our records.) | |
| The Articles of Organization for this Limited L Florida document numberL0800005 | • • • | 06/03/2008 | and assigned |
| This amendment is submitted to amend the fol | lowing: | | |
| A. If amending name, enter the new name o | of the limited liability company her | <u>·e</u> : | |
| The new name must be distinguishable and end w "L.L.C." Enter new principal offices address, if appli (Principal office address MUST BE A STREE | cable: | | LLC or the abbreviation |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE | BOX) | | |
| B. If amending the registered agent and registered agent and/or the new registered o | | our records, enter | the name of the new |
| Name of New Registered Agent: | A. Poonai | | |
| New Registered Office Address: | 1499 W Palmetto Park Roa | ad, Suite 140-C eter Florida street add | tress |
| | Boca Raton | , Florida | 33486 |
| | 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 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 |
|--------------|---|---|---|
| MGR | A.P.I Financial, Inc. | P O Box 397 Boca Raton, FL 33429 | Add Ø Remove |
| MGR | Delmar Financial Services | 101 Plaza Real South, Suite 219 Boca Raton, FL 33432 | Add Remove |
| MGR | A Poonai | 1499 W Palmetto Park Road Suite 140-C Boca Raton, FL 33486 | ✓ Add Remove |
| MGR_ | Christopher Conway | 1499 W Palmetto Park Road Suite 140-C Boca Raton, FL 33486 | Add Remove |
| <u>MGR</u> | Roger Gladstone | 1499 W Palmetto Park Road Suite 140-C Boca Raton, FL 33486 | ✓ Add Compose Comp |
| D. If amer | nding any other information, enter chan | ge(s) here: (Attach additional sheets, if necessary | Remove |
| | 2/13 , 20 | 11 | |
| | Λ () | er or authorized representative of a member NAI d or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00