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C. LEWIS

SEP 1 8 2012 **EXAMINER**

COVER LETTER

TO: Registration Division of C						
SUBJECT:	MONEY	MONEY TREE USA LLC				
SUBJECT.		ited Liability Company				
	of Amendment and fee(s) are su	_				
		SHULGIN, NIKOLAY				
	Name of Person					
	M	MONEY TREE USA LLC Firm/Company				
		P O BOX 3457				
		Address				
	SEMINOLE FL 33775 US City/State and Zip Code					
		best.pro@live.com (to be used for future annual report no				
For further information	E-mail address:		outication)			
	JLGIN, NIKOLAY	at (727) Area Code & Dayt	686-1481 time Telephone 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 enclose	Sed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Regi Divi P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 thassee, FL 32314	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle			

ARTICLES OF AMENDMENT TO SECRETARY OF STATE ARTICLES OF ORGANIZATION OF 2012 SEP 17 PM 3: 03

MONEY TREE USA LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Fiorita	Elimica Elability Company)			
The Articles of Organization for this Limited Liability C Florida document number	Company were filed on	10/23/2008	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	nited liability company her	<u>e</u> :		
	n/a			
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Compa	ny," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	RESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office add		ur records, <u>enter t</u>	he name of the <u>new</u>	
Name of New Registered Agent:				
New Registered Office Address:				
	En	Enter Florida street address , Florida		
	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 **Title** Name **Address** Type of Action MGR SHULGIN, NIKOLAY 7903 SEMINOLE BLVD ☐ Add Remove 2408 SEMINOLE FL 33772 US MGR 'OKHOTNIK' LLC 40 LENIN ST OREKHOVO-ZUEVO RU ✓ Add POSTAL CODE 142600 MO 14260 RU Remove **MGRM** SHULGIN, NIKOLAY 2026 20th AVE PKWY ✓ Add □ Remove INDIAN ROCK BEACH, FL 33785 Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 13 Dated Signature of a member or authorized representative of a member SHULGIN, NIKOLAY Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00