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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

FEB 19 2009

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT: Credit	Excel, LLC	ited Liability Company)	
	(Name of Emi	nica Elaomity Company)	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Alex Misenta		· · · · · · · · · · · · · · · · · · ·
		(Name of Person)	
	Credit Excel, LLC		
		(Firm/Company)	
	2630 NW 24th Avenue, l	Jnit A	
		(Address)	<del></del>
	Miami, FL 33142		09 TALL
		(City/State and Zip Code)	ARE TO TO
For further information	concerning this matter, please c	rall:	PEB 19 PH 3: 24 CAHASSEE, FLORIDA Celephone Number DA
Alex Misenta		at ( 305 ) 305-8567	FLO
(Name	of Person)	(Area Code & Daytime T	elephone Number 57 2
Enclosed is a check for t	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

ď,

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 3, 2009

25.50

ALEX MISENTA 2630 NW 24TH AVE #A MIAMI, FL 33142

SUBJECT: CREDIT EXCEL, LLC Ref. Number: L08000100704

09 FEB 19 PM 3: 2 SECRETARY OF STAN

We have received your document for CREDIT EXCEL, LLC and your cheeks) totaling \$25.00. However, the enclosed document has not been filed and is seting returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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: 209A00003820

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Credit Excel, LLC		
( <u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on our recomited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Co	mpany were filed on 10/24/2008	and assigned
Florida document number L08000100704		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
Epic 24, LLC		
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Company," the designment	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	E <u>SS)</u>	A Section 1
	<del></del>	CRE LA
		B I
Enter new mailing address, if applicable:		<u>8</u>
(Mailing address MAY BE A POST OFFICE BOX)		7 3 II
		<u> </u>
		24 IDA
B. If amending the registered agent and/or registered agent and/or the new registered office addresses		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida	street address)
		orida
	(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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

<u>itle</u>	<u>Name</u>	Address	Type of Action
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  ed	Signature of a member	r or authorized representative of a member	H 3: 24

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Filing Fee: \$25.00