#108000111322

(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:				

Office Use Only



000226602290

03/29/12--01028--010 **25.00

HILEU 12 MAR 29 AM 10: 19 SECRELARY OF STATE TALLAHASSEF FLORIDA

K.SALY EXAMINER APR 2 2012

COVER LETTER

Division of Corporations					
SUBJECT: Management & Financial Consultants, LLC Name of Limited Liability Company					
The enclosed Articles of Amendment and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Silvia Pinio Name of Person					
Management & Financial Consultants, LLC Firm/Company					
15605 SW 82 CT. Address					
The Village of PalmeTTO Bay, FL 33157 City/State and Zip Code.					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Silvia Pinto at (305) 254 - 6686 Name of Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$\ \times \text{Certificate of Status}\$\$ Certificate of Status \$\times \text{Certified Copy} \text{(additional copy is enclosed)}\$\$ Certified Copy \text{(additional copy is enclosed)}\$\$ (additional copy is enclosed)					
MAILING ADDRESS: Registration Section Division of Corporations STREET/COURIER ADDRESS: Registration Section Division of Corporations Division of Corporations					

P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED' 12 MAR 29 AM 10: 19

Management 2 Fina (Name of the Limited Liability (A Florida L	vai al Con Company as it now Limited Liability Con	SOLTANTS, LL CIALLAHASSEE, FLORIDA npany)	
The Articles of Organization for this Limited Liability Co. Florida document number 60800011132		on Dec. 04 / 2008 and assigned	
Fronda document number	- <i>-2</i> -	. •	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability compa	ny here:	
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability	Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR.	ESS)		
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office addr		s on our records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
New Registered Agent's Signature, if changing Registered	City Agent	Zip Code	
The section of the series of the section of the sec	<u>nguil.</u>		

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

<u>Title</u>	<u>Name</u>	•	Address	Type of Action
MGRN	1. Luis	PinTo	15605 SW 82 CT The Village of Palmet	MAdd 10 Bay □ Remove
-				Add Remove
				Add Remove
<u></u>				Add Remove
		•:		☐ Add ☐ Remove
				Add Remove
D. If amen	ding any other inf	ormation, enter chan	ge(s) here: (Attach additional sheets, if nec	eessary.)
-				
_				
Dated M	arah 24	<u>, 20</u>	12	,
		•	or printed name of signee	· · · · · · · · · · · · · · · · · · ·

Page 2 of 2

Filing Fee: \$25.00