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EXAMINER



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07/30/09--01016--023 **25.00

COVER LETTER

TO:	Registration Section Division of Corpo			-	
SUBJE	D.	YNAS TY	FUND	PAKING	
SUBJE	C1.	Name	of Limited	Liability Company	
The enc	losed Articles of Ar	mendment and fee(s)	are submit	tted for filing.	
Please r	eturn all correspond	lence concerning this	s matter to 1	the following:	
		HA	ery.	Name of Person FUNDRAISING Firm/Company	
		_		Name of Person	
		DYNA	sty	FUNDEALSING	
				· ····· · · · · · · · · · · · · · · ·	
		2729	N€	31 STBEET	
				Address	
		LIGH	Mas	ie PT, FL, 3300	64
		di	nasty	SE PT F2, 3300 City/State and Zip Code of Fundralsing @gh	rail. com
D C .	,	L-Itali a	auress. (to ex	e used for future annual/report florings	ation)
	_	cerning this matter,			
	HARRY PATT	<i>5</i> L	···-	at (754) 366. 88	300
	Name of P	erson		Area Code & Daytime	l elephone Number
Enclose	d is a check for the	following amount:			
\		\$30.00 Filing Fee Certificate of S		\$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

OINSECRET	FA.EU	
09 JUL 2-		. ,
09 JUH 30	AH 6:	ં′જુ જ >

ARTIC	OF OF OF	RGANIZATION	09 JUH 30
DYNASTY	FUNDE	LAISING, L	LC All 6:57
,		y as it now appears on o ability Company)	
The Articles of Organization for this Limited Lia Florida document number	hility Company y		,
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liabi	lity company here:	
The new name must be distinguishable and end with "L.L.C."			-
Enter new principal offices address, if applica		1129 NE 3	POINT FL, 33064
(Principal office address MUST BE A STREET	ADDKESS)	Lighthouse	18INI, FL, 55064
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>80X)</u>	2729 NE Lighthouse	31 STREET Point FL, 33064
B. If amending the registered agent and/or registered agent and/or the new registered offi			cords, enter the name of the nev
Name of New Registered Agent:	HA	ery PATEL	
New Registered Office Address:	2729	NE 31 STEE	≠[prida street address
	Lighth	ouse PT City	

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 addies, 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
MGRM	CARLOS A. FORNARIS	1717 N BAYSHORE DRIVE #395 MIAMI, FL, 33132	Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	_
			_
	Tury 27th, 20	∽ i	
	Signature of a member	er or authorized representative of a member	
		d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00