#11900036802

(Re	equestor's Name)	
(Ac	ldress)	
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PiCK-UP	☐ WAIT	MAIL
(Ви	ısiness Entity Nar	me)
(Document Number)		
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K.SALY EXAMINER DEC 27 2013

COVER LETTER

TO: Registration So Division of Con			
ExpoCre	edit LLC		
SUBJECT:	Name of Limit	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Cecilia G. O'Reilly		
		Name of Person	
	ExpoCredit LLC		
		Firm/Company	
	1450 Brickell Ave., S	Suite 2660	
		Address	
	Miami, FL 33131		
	coreilly@expocredit.	City/State and Zip Code	
	E-mail address: (1	o be used for future annual report notificati	on)
For further information c	oncerning this matter, please c	all:	
Cecilia G. O'Reilly		305 347-9222 ext.	
Name o	f Person	Area Code & Daytime To	dephone Number
Enclosed is a check for th	ne 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)

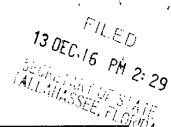
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

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



ExpoCredit LLC

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

The Articles of Organization for this Limited Liability	Company were filed on	2009 and assigned
Florida document numberL0900036802	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD)		
Enter new mailing address, if applicable:	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		records, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter F	lorida street address
	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
CFO	O'Reilly, Cecilia G.	1450 Brickell Ave., Suite 2660	Add
		MIAMI, FL 33131	Remove
			Remove
	<u>.</u>		
			Add
			Remove
٠			
			Add
			Remove
	-		Add
			Remove
			···
			Add
			Remove

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December 9	2013	
	Mul	
Carlos Escobar	Signature of a member or authorized representative	ve of a member
	Typed or printed name of signee	
	Page 3 of 3	
·	Filing Fee: \$25.00	