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S. HAWKES

NOV - 6 2009

EXAMINER

COVER LETTER

TO:	Registration Secti Division of Corpo			
SHRII	r ct ·	FINSER	RVICE II , LLC	
			ed Liability Company	
The en	closed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please	return all correspond	ence concerning this matter	to the following:	
STEPHEN G. STIM, ATTORNEY			Υ	
Name of Person				
		Α		
			Firm/Company	
5A FROST MILL ROAD				
Address				
MILL NECK, NY 11765				
City/State and Zip Code				
STIMCONSUL@AOL.COM E-mail address: (to be used for future annual report notification)				
		·	•	diffication)
For fu	rther information con-	cerning this matter, please co	all:	
	STEPHEN G.	STIM, ATTORNEY		477-2550
Name of Person		Area Code & Dayt	ime Telephone Number	
Enclos	sed is a check for the	following amount:		
\$25	5.00 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/COU Registration Sec Division of Corp Clifton Building 2661 Executive	porations	

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FINSERVICE II, 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 on04/23/2009 and assigned
Florida document numberL09000039225
1 Torreas about the most
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
TASS 8
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLQ" or the bbreviago
"L.L.C."
Finter new principal offices address if applicables
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the new
registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
. Florida
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

If Changing Registered Agent, Signature of New Registered Agent

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 of Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action Title** <u>Name</u> **Address ENGLISH DISTRIBUTION,** MGR 251 DIXIE BOULEVARD ✓ Add Remove DELRAY BEACH, FL 33444 INC. ☐ Add Remove ☐ Add Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **NOVEMBER 4** 2009 Dated Signature of a member or authorized representative of a member CHESTER F.ENGLISH III,MGR, FINSERVICE, LLC,MGRM

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00