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EXAMINER

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600183424306

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: MULTIFINANCIAL SERVICES & TRADE OF FLORIDA, LLC

Name of Limited Liability Company

The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		ERIK RODRIGUEZ			
		Name of Person			
	MULTIFINANCIAL S	SERVICES & TRADE C	OF FLORIDA, LLC		
		Firm/Company			
		531 E SAMPLE RD			
	•	Address		- h	
	POMPAN	O BEACH, FLORIDA	33064	2840 JUL 23 SECHETAR TALLAHASS	
	- ·!!-	City/State and Zip Code		E 2:	
	E-mail address: (i	rodriguezh@gmail.cor to be used for future annual repor	notification)	Lil	
For further information	concerning this matter, please c	all:			C
ERI	K RODRIGUEZ	at (_954_)	683-8259	<u> </u>	
Name	of Person	Area Code & I	Daytime Telephone Number	r	
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified	ate of Status &	d)

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

MULTIFINANCIAL SERVICES & TRADE OF FLORIDA, 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
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviat "L.L.C." Enter new principal offices address, if applicable: 531 E SAMPLE RD
"L.L.C." Enter new principal offices address, if applicable: 531 E SAMPLE RD
"L.L.C." Enter new principal offices address, if applicable: 531 E SAMPLE RD
(Principal office address MUST BE A STREET ADDRESS) POMPANO BEACH, FLORIDA 33064
Enter new mailing address, if applicable: 531 E SAMPLE RD
(Mailing address MAY BE A POST OFFICE BOX) POMPANO BEACH, FLORIDA 33064
B. If amending the registered agent and/or registered office address on our records, enter the name of the negistered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
City , Florida

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 **Title** Name **Address** Type of Action MGR MIGUEL, CARRERA 2073 RIDGESTONE LANDING SW ☐ Add ✓ Remove MARIETTA GA 30008 MGR ERIK, RODRIGUEZ ✓ Add □ Remove 6460 NW 29TH ST SUNRISE FL 33313 ☐ Add Remove Add Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2010 July 10 Dated ____ Signature of a member or authorized representative of a member Erik Rodriguez Typed or printed name of signee

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Filing Fee: \$25.00