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COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: HART-MONEY TAY DERVICE, 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:
LARRY Stokes Name of Person Smaret Mober Tax Species LLC Firm/Company 2434 Sheridan Street Address Hollywood, FL 33020 City/State and Zip Code Smartmoney Taxes LIC Legmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LARRY Stokes at (754), 400-8386 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount: [1] \$25.00 Filing Fee

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	•			
	0	_		
MART- MONEY LAX	SERVICE,	LhC		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on oility Company)	our records.)	-	
The Articles of Organization for this Limited Liability Company w	ere filed on <u>03-</u>	18-2010	_ and assi	gned
Florida document number L100000 2989 4				
This amendment is submitted to amend the following:				
<u> </u>				
A. If amending name, enter the new name of the limited liability	y company here:			
The new name must be distinguishable and end with the words "Limited "L.L.C."	Liability Company,"	the designation "LLC	" or the al	obreviation
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
		1 73a -	<u> </u>	
		ر ع ساز تا ساز		
Enter new mailing address, if applicable:		<u> </u>	=======================================	7 }
(Mailing address MAY BE A POST OFFICE BOX)		() : d (6) : d	5	Ç⊓kankew \$ ¥
		iri e	70	[7]
		5.	မွှေ	ga escu-
B. If amending the registered agent and/or registered offic	e address on our r	ecords, enter the	name of	the new
registered agent and/or the new registered office address here:		752-	60	
Name of New Registered Agent:			_	

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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
MGR	Sheneria J. Stokes	14141 S. Biscapus River Dr. MIAMI, FC 33161	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
		A: E:	Remove
D. If amend	ing any other information, enter change((s) here: (Attach additional sheets, if necessary)	
_			
Dated	Jarry		
	LARRY	or authorized representative of a member	····

Page 2 of 2

Filing Fee: \$25.00