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**EXAMINER** 

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SECRETARY OF STATE
DIVISION OF CORPORATION

## COVER LETTER .

TO: Registration Section Division of Corporations					
SUBJECT: AFFORDABLE FINANCIAL INVESTMENTS 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:					
YUSMILA CASTELLANOS					
Name of Person					
AFFORDABLE FINANCIAL INVESTMENTS LLC Firm/Company					
FiniteCompany					
3011 WEST FLAGLER STREET					
Address					
MIAMI, FL 33135					
City/State and Zip Code					
THEFORECLOSURECENTER@GMAIL.COM  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
YUSMILA CASTELLANOS at ( 305 ) 643-2929  Name of Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee \$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$Certified Copy \\ \text{(additional copy is enclosed)}\$\$ \$Certified Copy \\ \text{(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

## AFFORDABLE FINANCIAL INVESTMENTS LLC

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

The Articles of Organization	or this Limited Liability Company	were filed on	APRIL 9, 2010	and assigned 📜
Florida document number	L10000038531			ď
This amendment is submitted	to amend the following:			
A. If amending name, enter	the new name of the limited liab	lity company he	re:	
The new name must be distingu "L.L.C."	ishable and end with the words "Limit	ted Liability Comp	any," the designation "LL	.C" or the abbreviation
Enter new principal offices	address, if applicable:		·	
(Principal office address MU	ST BE A STREET ADDRESS)	<del></del>		<u>.</u>
Enter new mailing address,	if applicable:			
(Mailing address MAY BE A	POST OFFICE BOX)		where the second	
	ered agent and/or registered off new registered office address here		our records, <u>enter th</u>	e name of the new
Name of New Regis	tered Agent:			
New Registered Off	nter Florida street addre	ess		
		, Florida		
		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 **Address Type of Action** <u>Title</u> Name | **DENNISSE BENITEZ** MRGM 15434 SW 21 TER ☐ Add √ Remove MIAML FL 33185 MRGM **EMILY ECHAVARRIA** 3011 WEST FLAGLER STREET MIAMI, FL 33135 Remove ☐ Add ☐ Remove ∏Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated\_ Signature of a member or authorized representative of a member YUSMILA CASTELLANOS

Typed or printed name of signee

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Filing Fee: \$25.00