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PICK-UP WAIT MAIL				
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DIVISION OF STATE OF STATE ONS

DEC -9 2010

COVER LETTER

Division of Corporations					
SUBJECT: My Capital Investment Fund I, LC					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Articles of Correction and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
aling Kotselapova Name of Person					
My capital Investment Fund					
9190 Biscaure Blvd #201					
Miami Shokes, FL33138 City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Alma Kotselapo a at 305 4099509 Name of Person Area Code & Daytime Telephone Number					
Name of Felson V Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations					
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:					
\$25 Filing Fee \$\ \tag{S55 Filing Fee \tag{S55 Filing Fee \tag{Certificate of Status}}\$\$ \$\ \tag{S55 Filing Fee \tag{Certificate of Status}}\$\$ \$\ \tag{Certificate of Status}\$\$\$ \$\ \tag{Certified Copy}\$\$					

CR2E062 (08/05)



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

10 DEC -8 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

November 23, 2010

ALINA KOTSELAPOVA 9190 BISCAYNE BLVD # 201 MIAMI SHORES, FL 33138

SUBJECT: MY CAPITAL INVESTMENT FUND I LLC

Ref. Number: L10000096666

We have received your document for MY CAPITAL INVESTMENT FUND I LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

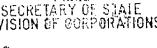
If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 410A00027498

ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION DIVISION OF GORPORATIONS OF



10 DEC -8 PH 1: 18

MY CAPITAL INVESTMENT FUND I LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) 09/15/2010 and assigned The Articles of Organization for this Limited Liability Company were filed on _____ Florida document number _____ 10000096666 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 abbreviation "L.L.C." 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGR	ANTHONY CHAO	9190 BISCAYNE BLVD STE 201 MIAMI SHORES, FL 33138	Add _ ☑ Remove		
MGR_	E-Capital Access Corporation	9190 BISCAYNE BLVD STE 201 MIAMI SHORES, FL 33138	✓ Add ☐ Remove		
			Add Remove		
			Add Remove		
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***************************************	· · · · · · · · · · · · · · · · · · ·	<u>· </u>	Add Remove 		
D. If amendia	Signature of a member of	s) here: (Attach additional sheets, if necessary.) /	SECRETARY OF STATE PIVISION OF CORPORATIONS TO DEC -8 PH 1:18		
Anthony Chao Typed or printed name of signee					

Page 2 of 2

Filing Fee: \$25.00