

L 100000697296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

A

Office Use Only

B. KOHR  
MAR 28 2012  
EXAMINER



900225146669

900225146669  
03/27/12--01003--012 \*\*30.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 MAR 26 AM 8:26

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: I AND T FINANCIAL SERVICE, 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:

DOMENICK PUCILLO

Name of Person

Firm/Company

17 AVENUE A

Address

NEWARK, NEW JERSEY 07114

City/State and Zip Code

Domenick@fastcashcompany.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DOMENICK PUCILLO

Name of Person

at ( 973 )

643-1447

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 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/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
MAR 26 AM 8:26  
12 MAR 26

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**I AND T FINANCIAL SERVICE, 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 SEPTEMBER 17, 2010 and assigned  
Florida document number L10000097296.

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:

Domenick Pucillo

New Registered Office Address:

3118 West 76th St

Enter Florida street address

Highland

City

Florida 33018

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.

Domenick Pucillo  
If Changing Registered Agent, Signature of New Registered Agent

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 MAR 2011 AM 8:26

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:

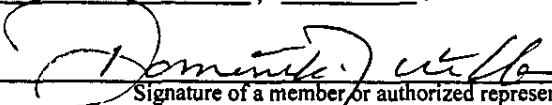
MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	OFELIA VASALLO	3118 W 76TH ST HIALEAH, FL 33018	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	DOMENICK PUCILLO	17 AVENUE A NEWARK, NJ 07114	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated MARCH 15, 2012

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

DOMENICK PUCILLO  
\_\_\_\_\_  
Typed or printed name of signee