

L10000108994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

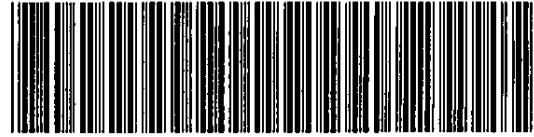
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

NOV 29 2010

EXAMINER

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: The Landing Capital Source, 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:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Darin Wade Mellinger, Esquire  
Name of Person

Darin Wade Mellinger, P.A.  
Firm/Company

1200 North Federal Highway, Suite 200  
Address

Boca Raton, Florida 33432  
City/State and Zip Code

dwm@mellingerlaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Darin Wade Mellinger, Esquire at ( 561 ) 210-8570  
Name of Person 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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
10 NOV 24 AM 11:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Landing Capital Source, 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 October 19, 2010 and assigned Florida document number L10000108994.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

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:

c/o Darin Wade Mellinger, P.A.

**(Principal office address MUST BE A STREET ADDRESS)**

1200 North Federal Highway, Suite 200

Boca Raton, Florida 33432

Enter new mailing address, if applicable:

same as principal office address

**(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:

N/A

New Registered Office Address:

Enter Florida street address

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

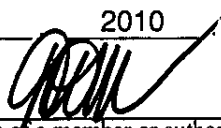
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	German David Modera	1200 North Federal Highway Suite 200 Boca Raton, Florida 33432	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

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 TALLAHASSEE, FLORIDA

Dated November 22 2010



Signature of a member or authorized representative of a member

Darin Wade Mellinger, Esquire

Typed or printed name of signee