L11000026934

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2011 APR 21 AM M: 20 SECRETARY OF STATE

C. LEWIS

APR 2 2 2011

EXAMINER

COVER LETTER

	Registration Secondivision of Corp		•		v
SUBJEC	OPtion	n 1 Mercha Name of	nt and Limited Liab	Lending Scrui	ces LLC
The encle	osed Articles of A	mendment and fee(s) ar	e submitted f	or filing.	
Please re	turn all correspon	dence concerning this m	atter to the fo	ollowing:	
		Rashid W	1alker Ni	une of Person	
				nt and Lending	Services LLC
		444 Brick	· II Ave	Address	
•		Miami f	lonida City/St	3313 \ate and Zip Code	
		Rushid O OF	tion 1	Merchant and Lend:	ng Services, com
For furth	er information co	ncerning this matter, ple	ase call:		
Rash	nid Wal	Cer Person	1	at (<u>305)</u> 925 - 3 Area Code & Daytime T	6 elephone Number
Enclosed	is a check for the	e following amount:			
\$25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of State	us — C	5.00 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

ed Liability Company as it now appears on our records (A Florida Limited Liability Company) Florida document number L1\0000 26934 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 "LI "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

Zip Code

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>	Name	Address	Type of Action
MGRM	Richard Jones VP	444 Brickell Ave Miami Florida 33131	X Add Remove
			Add Remove
			Add Remove
			Add Remove
•			Add Remove
			Add Remove
D. If amendi	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
		NEL AHASSEE: FLOOR	ZILL APR 24 MM: 26
Dated <u>Apr</u>	Jan Jane		
·	Signature of a member of	or authorized representative of a member	
	Richard Typedo	or printed name of signee	
	- · · · · · · · · · · · · · · · · · · ·	•	

Page 2 of 2

Filing Fee: \$25.00