# 11000033670

(Requestor's Name)  (Address)  (Address)	300211288453	
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	08/29/1101029017 **30.00	
(Document Number) . Certified Copies Certificates of Status		

Special Instructions to Filing Officer:

L. SELLERS

AUG 3 0 2011

**EXAMINER** 

Office Use Only



# **COVER LETTER**

Division of Corporations				
SUBJECT: Fin	Ancial	Boundavie	256C	
	Name of Limite	ed Liability Company		
The enclosed Articles of Amendment and fee(s) are submitted for filing.				
Please return all correspond	dence concerning this matter t	to the following:		
Mercella Haynos				
		Name of Person		
FINAncial Boundaries LLC				
		Firm/Company		
	19909	US HICKWA	er YIN	
		Address		
LUTZ FL 33549.				
	Λ ,	City/State and Zip Code		
	allision	11@ YAKOO COM.	····	
•	E-mail address: (to	be used for future annual report notificati	ion) '	
For further information con	cerning this matter, please ca			
Mercella	Haynas	at (352) 200 - D	659.	
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)	S60.00 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
Tallahassee; FL 32314
Tallahassee, FL 32301

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FINANCIAL BOI	jundavies LLC.	
(Name of the Limited Liability Compan (A Florida Limited Liability		
The Articles of Organization for this Limited Liability Company v Florida document number <u>LIODO33 670</u> .	were filed on 3 21 11 and assign	ned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil		 previation
Enter new principal offices address, if applicable:	,	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BOX)</u>	NIA	
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here		the new
Name of New Registered Agent:	NA ==	T
New Registered Office Address:		A PARTITION OF THE PART
New Registered Agent's Signature, if changing Registered Agent:	City Exp Code	J ·

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.

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with

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>	Type of Action
MER	Theresa meter	Sutherland 2218 Wendall Sp Brandon, EL 33516	Cings C+ Ap+ 202 M Add Remove
			Add Remove
-			Add Remove
	<u> </u>		AddRemove
			AddRemove
			AddRemove
D. If an	nending any other information,	enter change(s) here: (Attach additional sho	eets, if necessary.)
		2011	
Dated		e of a member or authorized representative of a n	nember

Page 2 of 2

Filing Fee: \$25.00