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EXAMINER



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SECRETARY OF STATE PROVISION OF CORPORATIONS

COVER LETTER - 4

TO: Registration Division of	1 Section Corporations			
SUBJECT:		Finance, LLC		
	Name of Lin	nited Liability Company		
The enclosed Articles	s of Amendment and fee(s) are so	ubmitted for filing.		
Please return all corre	espondence concerning this matte	er to the following:		A Sec
		Stefan M. Davis		THE SECRETARY OF ORATION.
		-8 F.CO		
	RPO			
	? ن ــ			
		Address		
For further information	on concerning this matter, please	call:		
Stefan M. Davis		at (352)	472-7773	
Nan	ne of Person	Area Code & Da	sytime Telephone Numbe	r
Enclosed is a check for	or the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is encl	osed) Certified	ite of Status &

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

	SMD Finar	nce, LLC				
(Name of the Limited	d Liability Compan A Florida Limited Li	y as it now appea ability Company)	rs on our records.)			
The Articles of Organization for this Limited L	iability Company	were filed on	06/08/2011	and assigned		
Florida document number L1100006	7226					
				.7		
This amendment is submitted to amend the following	lowing:			J. SE		
A. If amending name, enter the new name of	of the limited liahi	lity company hei	re:	SE EE		
	N1/A			P RET		
The new name must be distinguishable and end wi "L.L.C."	ith the words "Limit	ed Liability Comp	any," the designation "L	LC" or the obbreviation		
"L.L.C."			•			
Enter new principal offices address, if applicable:		N/A	_			
(Principal office address MUST BE A STREE	ET ADDRESS)					
Enter new mailing address, if applicable:		N/A				
(Mailing address MAY BE A POST OFFICE	BOX)					
B. If amending the registered agent and/ registered agent and/or the new registered o			our records, enter t	he name of the new		
registered agent and/or the new registered o	mee address here	•				
Name of New Registered Agent:	N/A					
			 -			
New Registered Office Address:	-	Fn	ter Florida street addi	Poss		
	Enter Ptortaa Street aaaress					
		City	, Florida	Zip Code		
		City		sip cour		

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, <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 **Type of Action** Address Title Name **MGRM** Jon R. Anfinsen ✓ Add 4830 NW 43rd Street Remove Unit D-64 Gainesville, FL 32606 Mark E. Horton MGRM 17263 Boca Club Blvd., #8 ✓ Add Remove Boca Raton, FL 33487-1034 ☐ Add ☐ Remove Remove \square Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) I. Effective date of this amendment shall be: September 2, 2011 (Formaccounting purposes) II. Economic Interests of the Members is as follows: A) Stefan M. Davis 34% B) Jon R. Anfinsen 33% C) Mark E. Horton 33% September 2 2011 Dated_ Signature of a member or authorized representative of a member Stefan M. Davis

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee