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SEGRETARY OF STATE
FALLAHASSEE. FLORIO

J. BRYAN

JUL 25 2011

EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations
SUBJI	BLackfin Capital Management, LLC. Name of Limited Liability Company
The en	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Jon Wasselman Name of Person
	BLackfin Capital Management, LLC.
	107 Via Castilla Address Juniter FL 33458
	Jupi Ter FL 33458 City/State and Zip Code
	E-mail address: 16 be used for future annual report notification)
For fu	rther information concerning this matter, please call:
	Name of Person at (561) 376-6321 Area Code & Daytime Telephone Number
Enclos	ed is a check for the following amount:
□√ \$2:	5.00 Filing Fee \$\ \times \text{\$\text{S55.00 Filing Fee & }\ \text{\$\text{Certificate of Status}} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\text{S60.00 Filing Fee, }\ \text{\$\text{Certificate of Status & }\ \text{\$\text{Certified Copy (additional copy is enclosed)}}} \text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \text{\$\text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \$\text{\$\tex

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

Blackfin Capit	al Managemn	et, LLC.
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appear tón our rec c liability Company)	ords.)
The Articles of Organization for this Limited Liability Company Florida document numberL_\\000076222	were filed on July, 1	sT, 2011 and assigned
This amendment is submitted to amend the following:	of the limited liability company here: Capital Management, LLC with the words "Limited Liability Company," the designation "LLC" or the abbreviation licable: EET ADDRESS) d/or registered office address on our records, enter the name of the new office address here: Enter Florida street address Florida	
A. If amending name, enter the new name of the limited liab BLackfin Capital The new name must be distinguishable and end with the words "Limit"L.L.C."		LLC. gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		a year on
(Principal office address MUST BE A STREET ADDRESS)		超声型
Enter new mailing address, if applicable:		SSEE OF IT
(Mailing address MAY BE A POST OFFICE BOX)		98 2
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida s	treet address
		orida
	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 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

<u> Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			
 			Add Remove
			AddRemove
			AddRemove
			Add Remov
D. If amend	ding any other information, enter char	nge(s) here: (Attach additional sheets, if	necessary and
			Dr.
_		Λ	
Dated	21 st July, 2	OII.	
	Cionatura of a manufactura	er or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00