111000109909

Office Use Only



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SECRETARY OF STATE

AND FILED

D. BRUCE
AUG 22 2012
EXAMINER

Division of Corporations

August 3, 2012

SACHIA J. CHHEDA 5934 WILLOWS BRIDGE LOOP ELLENTON, FL 34222

SUBJECT: FLCASHBUYER LLC Ref. Number: L11000109909

We have received your document for FLCASHBUYER LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 012A00020287

SECRETARY OF STATE

COVER LETTER

Division of Corp					
SURJECT: FLCA	SHBUYER LLC				
SUBSECT,	Name of Limi	ted Liability Company	· ·		
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	Sachin T.	Clahedia.			
	Sachin J.	Name of Person			
	FLCASHBU	Firm/Company			
		. ,			
	5934 Willow	s Bridge Loop			
		Address			
Ellenton, FL, 34222				12 SEC	
City/State and Zip Code Short-sale Sachin @ quail. Com E-mail address: (to be used for future annual report notification)					•,
	shortsatesa	din@ quail. com	_	12 AUG 21 SECRETARY ALLAHASSE	
	E-mail address: (to be used for future annual report notification	n)		
For further information co	oncerning this matter, please o	eall:		CRETARY OF STATE LAHASSEELFLORIO	0)-[
_	•			원절 5	(_
Sachin J-Chh		at (727) 348- 2085 Area Code & Daytime Tele	<u>{</u>	St. O	
Name of	Person	Area Code & Daytime Tele	phone Number		
Enclosed is a check for th	e 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 Statu Certified Copy (additional copy is		

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

FLCASH BUYER 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 o	n 9/26/2011	and assigned		
Florida document number L 11000109909				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability compar	ny here:			
The new name must be distinguishable and end with the words "Limited Liability ("L.L.C."	Company," the designation	'LLC" or the abbreviation		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
	· · · · · · · · · · · · · · · · · · ·			
		F RETA VHAS		
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·			
(Mailing address MAY BE A POST OFFICE BOX)				
•		S ù		
		555 200A		
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	s on our records, enter	the name of the new		
registered agent and/or the new registered office address here.				
Name of New Registered Agent:				
Name of New Registered Agent.	,			
New Registered Office Address:	Enter Elevido etnest as			
	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 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>	_Address	Type of Action
<u>mgrm</u>	Daniel Skinner	22655 mariano Street Woodland Hills, CA, 91367	Add Remove
			Add Remove
			Add Remove
			12 AUG 2
			SRY — EA
			— Add ☐ Remove
_	· · ·	e(s) here: (Attach additional sheets, if necessary.)	_
		my business partner. Mariano Stret, woodland H	_ ドル、
<u></u>	1, 91367. His contac	+ phase number is 818-851	- 1-0819.
	7/31/2012		
Dated	Sachin J. Chheda Signature of a member Sachin J. Chhed Typed	·	
	Sachin J. Chhed	or authorized representative of a member or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00