L120000/4/25

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
,				
(City/State/Zip/Phone #)				
☐ PICK-UP ☐ WAIT ☐ MAIL				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiness Linky Maine)				
(Document Number)				
·				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
A. LUNT				
A. LUNI				
FEB 13 2011				

Office Use Only

200220364772

02/10/12--01007--015 **25.00

2012 FEB 10 PM 1: 89

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Section Division of Corporations	
SUBJECT: TAX SY	WERS FINANCIAL. LLC Name of Limited Liability Company
The enclosed Articles of Amendme	nt and fee(s) are submitted for filing.
Please return all correspondence con	ncerning this matter to the following:
F	FELIX LABBAN Name of Person
TO	X SAVERS FINANCIAL LLC Firm/Company
51	+41 MARLEON DR
<u> w</u>	Firm/Company HHI MARCLEON DR Address INDERMERE FL 34786 City/State and Zip Code
***************************************	E-mail address: (to be used for future annual report notification)
For further information concerning	this matter, please call:
FELI X LABBY	at (401) 341-100 \ Area Code & Daytime Telephone Number
Enclosed is a check for the followin	g amount:
\$25.00 Filing Fee \$30.0 Cer	O Filing Fee & \$\ \tag{\$55.00 Filing Fee & \$\ \tag{\$60.00 Filing Fee, }\\ \tag{\$certificate of Status & \$\ \tag{\$certified Copy }\\ \tag{\$additional copy is enclosed}\) Certified Copy (additional copy is enclosed)
MAILING ADDI Registration Section Division of Corpo P.O. Box 6327	on Registration Section

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INNAN CITL. bility Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on 2-2-12 Florida document number <u>L120000 16125</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TAKSAVERS FINANCIAL.

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation 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

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 = M MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
	The state of the s		Add Ne Remove
t. trace Manager		A SSE	Acttel Remove
D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary)	
			
			-
Dated	2-1-12 Jelu Iulilia	·	
	Signature of a member of FELIX CABI	r authorized representative of a member BM printed name of signee	

Page 2 of 2

Filing Fee: \$25.00