

L12000046147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

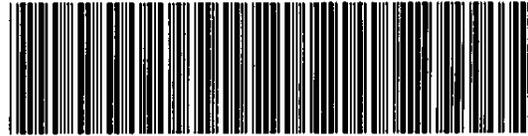
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

J. BRYAN

APR 11 2012

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DAS Finance, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gary Walker, Esquire
Name of Person
Allen Dell, P.A.
Firm/Company
202 S. Rome Avenue, Suite 100
Address
Tampa, Florida 33606
City/State and Zip Code
SBaker@allendell.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Gary Walker, Esquire at (**813**) **223-5351**
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)
- \$60.00 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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

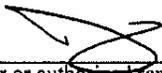
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	David Schlaifer	402 E. Oak Avenue Tampa, FL 33602	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	David Schlaifer	Post Office Box 1275 Tampa, FL 33601	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	V. James Garofalo	1008 Roehampton Vale Virginia Beach, Virginia 23452	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

n/a

Dated April 9, 2012



 Signature of a member or authorized representative of a member
 David Schlaifer

 Typed or printed name of signee