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\	INC. 236 East 6th Avenue . Tallahassee, Florida 32303
	P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666
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	РНОТОСОРУ
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	FILING LIC Amend
	24 HOUR FUTURES LCC (CORPORATE NAME AND DOCUMENT #)
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	24 HOUR FU	· - · · · · · · · · · · · · · · · · · ·		
(Name of the Limite	d Liability Compa A Florida Limited	ny as it now appears on ou Liability Company)	r records.)	
The Articles of Organization for this Limited & Florida document number L12000153079		y were filed on <u>12/6/201</u>	2 and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the <u>limited</u> lia	bility company here:		
	KB Finance	LLC		
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	nited Liability Company," the	designation "LLC" or the abbrevi	ation
Enter new principal offices address, if applicable:		N/A		
(Principal office address MUST BE A STRE	ET ADDRESS)			_
Enter new mailing address, if applicable:		N/A		_
(Mailing address MAY BE A POST OFFICE	E BOX)		47 % O I	,,,,,,
B. If amending the registered agent and registered agent and/or the new registered of	l/or registered o	office address on our rec re:	cords, enter the mame of the	TE J nev
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			_
		Enter Flor	rida street address	
		City	, Florida Zip Code	
		Cuy	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 Changing Registered Agent, Signature of New Registered Agent

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 = Ma MGRM = N	nager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
		\$ FF-1104 SHI-1	Remove
			—· ——
			L_] Add
			Remove
			Remove

formation, enter change(s) here: (Attach additional sheets, (f necessary.)
<u>2013</u>
Au hi
Signature of a member or authorized representative of a member Alberto Pontonio
Typed or printed name of signee Page 3 of 3

Filing Fee: \$25.00