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3 FEB 15 PH 2: 41

K.SALY EXAMINER FEB 18 2013

COVER LETTER

Division of Corporations 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: Randy Bleineiss Name of Person Advanced Financial Consulting, LLC
Firm/Company 2500 Merchants Row Blvd Unit 68 Tallahassee, FC, 32311
City/State and Zip Code Rancy, Sleiweiss & Yahoo, Com
Expail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (<u>207</u><u>364-3390)</u> Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$25.00 Filing Fee □\$30.00 Filing Fee & □\$55.00 Filing Fee & □\$60.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

13 FEB 15 PM 2:41

ADVANCED F	INAUCIAL CONSULTING LLC" MARCE FI	Chil
(Name of the Limited t	Liability Company as it now appears on our records.) Florida Limited Liability Company)	wiit,
The Articles of Organization for this Limited Lia Florida document number	ability Company were filed on	
Florida document number <u>C1300001</u>	214	
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of the	the limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the designation "LLC" or the abbrevia	 ation
Enter new principal offices address, if applical	ble:	_
(Principal office address MUST BE A STREET	ADDRESS)	
		_
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	
		_
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the coce address here:	new
Name of New Registered Agent:		_
New Registered Office Address:		_
	Enter Florida street address	
	, Florida	<u></u>
	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 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 = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR	Randy Bleiweiss	2500 Herchants Row	Add
	v	2500 Merchants Row Blud Lenit 68	Remove
		Tallahassee, R, 323/1	_
			Add
			Remove
			_
			Add
			Remove
			_
			Add
			Remove
			_
			_ Add
			Remove
			_
			_ Add
			Remove

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_	
	La State
	Asignature of a member or authorized representative of a member

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Filing Fee: \$25.00