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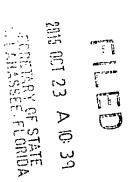
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COVER LETTER

COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: Sustin Finencial Planning, CLC 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:
Gustin Financial Planning CC Firm/Company 1540 Internetional Perlawry, Suite DCCC Address Lote Mary - 32746 Grag Cousy State and Zip Code Cong Cousy State and zip Code
For further information concerning this matter, please call:
Name of Person at (407) 353 - 7700 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
Section Filing Fee Securificate of Status Sec

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

Gestin Financial Planning 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 onand assigned
Florida document number 6/30000/36 38
This amendment is submitted to amend the following
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
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) Eko Mory, FC 3274C 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
. Florida
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 605, 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

Page 1 of 3

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Page 3 of 3
Filing Fee: \$25.00