Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H130000843063)))



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To:

Division of Corporations

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Fax Number : (850) 617-6383

From:

Account Name : GFB TAX SERVICE LLC

Account Number : I20120000047

Phone : (754) 246-6160

Fax Number

: (954)510-2072

Enter the email address for this business entity to be used for ≇future annual report mailings. Enter only one email address please,

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NEW WORLD FINANCIAL INVESTMENTS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

APR 1 7 2013

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COVER LETTER

TO: Reg

Registration Section Division of Corporations H130000843063

SHRIECT.

NEW WORLD FINANCIAL INVESTMENTS, 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:

GASTON BELEN

Name of Person

GFB TAX SERVICE LLC

Firm/Company

6303 BLUE LAGOON DRIVE SUITE 400

Address

MIAMI, FL 33126

City/State and Zip Code

GASTONBELEN@GFBTAXSERVICE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GASTON BELEN

at (_____) **____**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

S25.00 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 Talfahassec, 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

H130000843063

NEW WORLD FINANCIAL INVESTMENTS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(, , , , , , , , , , , , , , , , , , ,	abinty company)	
The Articles of Organization for this Limited Liability Company	were filed on 01/29/2013	and assigned
Florida document number L13000014956		•
· · · · · · · · · · · · · · · · · · ·		1 3
This amendment is submitted to amend the following:		THE SECTION
A. If amending name, enter the new name of the limited liab	ility company here:	元二
The new name must be distinguishable and end with the words "Limit	and Link Histo Common of the designation :	
"L.L.C."	ed Liability Company, the designation	LLC Office appreciation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		T.
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off	ice address on our records, <u>enter</u>	the name of the new
registered agent and/or the new registered office address here		
Name of New Registered Agent:		
New Registered Office Address:		1.1
	Enter Florida street address	
	, Florida	
 	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre	e to act in this capacity. I further a	gree to comply with
the provisions of all statutes relative to the proper and compl	ete performance of my duties, and I	am familiar with and
accept the obligations of my position as registered agent as p	rovided 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 ti	тнеа навину
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 = Manager MGRM = Managing Member

Title MGRM	Name DAS ENTERPRISES INC	Address 6303 BLUE LAGOON DRIVE SUITE A MIAMI, FL 33126	Type of Action 400 Add Remove
			Add
**************************************			THE REPORT OF THE PARTY OF THE
			Remove Add Remove
			Add Remove
			Add

D. If amending any other information, enter change(s) here: (Attach additional sheets, i	H130000843063 fnecessary.)
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Dated APRIL 15 201/3	<u></u>
Dit.	
Signature of a member of authorized representative of a membe GASTON F BELEN	r
Typed or printed name of signee	

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Filing Fee: \$25.00