Division of Corporation orida Department of

Division of Corporations Electronic Filing Cover Sheet

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(((H13000067984 3)))



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From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694

Fax Number : (305)633-9696

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BURILLO FINANCIAL, LLC**

| Certificate of Status | 0 |
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B. BOSTICK

MAR 2 6 2013

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EXAMINER

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3/25/2013 03/52/5013 12:01



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| BURILLO FINANCIAL, LLC | | |
|--|---|---------------------|
| (Name of the Limited Liability Company (A Florida Limited Liab | as it now appears on our records.) offity Company) | - |
| The Articles of Organization for this Limited Liability Company we Florida document number <u>L13000632013</u> | ere filed on MARCH 1, 2013 2 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabilit | y company here: | |
| The new name must be distinguishable and end with the words "Limited "L.L.C." | Limbility Company," the designation "LLC" | or the abbreviation |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MI/ST BE A STREET ADDRESS) | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: | e address on our records, <u>enter the n</u> | ame of the new |
| Name of New Registered Agent: | | <u>- 25 5</u> 0 |
| New Registered Office Address: | Enter Florida street address Florida | |
| | | p Code |
| New Registered Agent's Signature, if changing Registered Agent: | |)3 A |

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

Page 1 of 3

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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:

| <u>Title</u> | Name | Address 1 | ype of Action |
|--------------|-------------------------|--------------------------|--------------------|
| MGRM | JORGE BURILLO AZCARRAGA | 430 GRAND BAY DR,APT 601 | Add |
| | | KEY BISCAYNE, FLA 33149 | Remove |
| MGMR | EDWARD BURILLO | 430 GRAND BAY DR,APT 601 | . 🔽 Add |
| | | KEY BISCAYNE, FL 33149 | Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Add Fremove 6: |
| | | : | Add Remove |

Page 2 of 3

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|--------------|----|
|--------------|----|

| D. | If amending any other | information, enter change(5) here: (Attach additional sheets, if necessary.) |
|------|-----------------------|--|
| | | |
| | | |
| | | |
| | | |
| Date | ,d MARCH | 2013 |
| | | Signature of a member or authorized representative of a member |
| | | Educido Buillo |

Page 3 of 3

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