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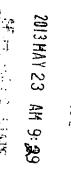
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J. SAULSBERRY EXAMINER

MAY 30 2013

COVER LETTER

TO: Registration Sect Division of Corpo		
SUBJECT:Rada Fin	nance LLC	
	Name of Limited Liability Company	
The enclosed Articles of A	mendment and fee(s) are submitted for filing.	
Please return all correspond	dence concerning this matter to the following:	
	Daniel Ades	
	Name of Person	
	c/o Kawa Capital Management	
	Firm/Company	
	846 Lincoln Rd, 4th FL	2013
	Address	2013 MAY
	Miami Beach, FL 33139	23
	City/State and Zip Code	a
	daniel@kawa.com E-mail address: (to be used for future annual report notification)	
For further information con	ncerning this matter, please call:	Service &
Mara Ge	MMMUS at 786 369.545	\$
Name of P	Person Area Code & Daytime Telephone Nur	moer
Enclosed is a check for the	following amount:	
△ \$25.00 Filing Fee	Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certificate of Status	Filing Fee, ificate of Status & ified Copy itional copy is enclosed)

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

(Name of the Limited Liability Comp (A Florida Limited	any as it now appear: Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Compan	y were filed on <u>Ma</u>	arch 13, 2013	and assigned
Florida document number <u>L13000037899</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here	2:	
N/A			
The new name must be distinguishable and end with the words "Lir" L.L.C."	nited Liability Compar	ny," the designation "LI	.C" or the abbrevi
Enter new principal offices address, if applicable:		- <u>:</u> 77	
(Principal office address MUST BE A STREET ADDRESS)	N/A	<u> </u>	2013
	<u> </u>		
			72
Enter new mailing address, if applicable:		•••	ω
(Mailing address MAY BE A POST OFFICE BOX)	N/A	4	宝 11
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) ** ££	* \$\
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		ur records, <u>enter th</u>	e name of the
Name of New Registered Agent: N/A	•		
New Registered Office Address:			
	Ente	er Florida street addr	ess
		, Florida	
	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
MGRM	Strasburg Business Group Ltd	846 Lincoln Rd, 4th Fl	_ Add
		Miami Beach, FL 33139	X Remove
MGRM	Daniel Ades	846 Lincoln Rd, 4th Fl	X Add
		Miami Beach, FL 33139	Remove
			Add
			Remove
			723 Add
			Remove
			Add
			Remove
			Add
			Remove

fan	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ı_	May 20 . 2013
	/0
	Signature of a member or authorized representative of a member
	-Daniel Hales
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 MAY 23 AH 9: 29

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