113000/48684

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	٠,
(Cit	ry/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of S	tatus
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Alliance Commercial Finance, 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:

Mike Navnit

Name of Person

Alliance Commercial Finance, LLC

Firm/Company

8215 Chester Lake Road North

Address

Jacksonville, FL 32256

City/State and Zip Code

mdoshi39@aol.com

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

For further information concerning this matter, please call:

Mike

,,904<u>,</u>61**2-444**5

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 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 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

Alliance Commercial Fina (Name of the Limite	nce, LLC d Liability Company as it now ap A Florida Limited Liability Compa	pears on our records.)	
The Articles of Organization for this Limited I Florida document number L13000148684	Liability Company were filed on		_ and assigned
This amendment is submitted to amend the follow. A. If amending name, enter the new name of	U	<u>here</u> :	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Co	ompany," the designation "LLC	or the abbreviation
Enter new principal offices address, if appli	cable:		<u></u>
(Principal office address MUST BE A STRE	ET ADDRESS)	,	<u> </u>
· ·			建 "竹
•		(0 :	CO
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		17 to	8 C.
		er fr	69 D
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	/or registered office address office address here:	on our records, <u>enter the</u>	name of the new
Navy Pagiatowad Office Address	8215 Chester Lake Ro	ad North	_
New Registered Office Address:		Enter Florida street addres	<i>s</i> ·
•	Jacksonville	, Florida 3225	56
	City	, Fiorida	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 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	<u>Name</u>	Address	Type of Action
MGR	Harsha Shah	5959 Youngerman Circle East	Add
·.	•	Jacksonville	Remove
<i>;</i> ·		FL 32244	_
MGR	Ryan Burress	141 Eastfield Court	Add
•		Alpharetta	Remove
		GA 30005	~>
		17 pr 17 cr 28 2 cr 20 cr	- 🔀 - 📆 - 🎘 Add
		(分類 (分型 (分子 (元)	Remove
		77 (*) 17 (*) 19 (*) 27 (*)	
· ·			Add
· · · · · · · · · · · · · · · · · · ·			Remove
			Add
			Remove
			Add
•.			Remove
			<u> </u>

D. lf am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
·	•
·	
•	
Dated N	lovember 12, 2013
:	Ryan Bureess
	Signature of a member or authorized representative of a member
	Ryan Burress
	Typed or printed name of signee
	Dogg 2 of 2

Filing Fee: \$25.00