## Florida Department of State Division of Corporations. Electronic Filing Cover Sheet

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(((H14000204206 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : PANELL LAW GROUP, LLC

Account Number : I20130000088 Phone : (305)513-8606 Fax Number : (305)513-8605

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AMERICAN EXCHANGE FINANCIAL SERVICES L

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2014-08-29 20:32:33 (GMT)

13055138605 From: Angle Corton

**COVER LETTER** 

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TO:

Registration Section Division of Corporations

enn rezer.

AMERICAN EXCHANGE FINANCIAL SERVICES 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;

ELI PANELL, ESQ., CPA, CFP(r), LL.M.

Name of Person

PANELL LAW GROUP, LLC

Firm/Company

8750 NW 36 St., Suite 425

Address

Doral, FL. 33156

City/State and Zip Code
eli@panell-law.com

For further information concerning this matter, please call:

Angeles Cortón, Paralegal

, 305 , 513-8606

Name of Person

Area Code

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

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, Ft. 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahasses, 19, 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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## AMERICAN: EXCHANGE FINANCIAL SERVICES 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 on August 5, 20	)14 mg signed
Florida document number <u>L14000122282</u>		DE T
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the live	mited liability company here:	
The new name must be distinguishable and end with the words "I	Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	AND THE PROPERTY OF THE PROPER	
(Principal office address MUST BE A STREET ADI	DRESS)	· · · · · · · · · · · · · · · · · · ·
		Water Company
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	and to see the second s	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	255
	· · · · · · · · · · · · · · · · · · ·	itorida
	$Ci\phi$	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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M AMBR = A	anager uthorized Member	H14000204206 3	
<u>Title</u>	Name	Address Type of Action	
MGR	SILVINA CUPEIRO	c/o PANELL LAW GROUP	
		8750 NW 36 St., Ste. 425 ■ Remove	
		Doral, FL. 33178	
		☐ Remove	
		□ Add	
	□ Remove		
		□ Add	
		□ Remove	
		SECULATION AND ASSETS OF THE PARTY OF THE PA	
		FLORIDA RIDA BLORIDA B	e e
		□ Remove	

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).	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
i. 1	Effective date, if other than the date of filing:  The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)
	Dated August 29th 2014
	Signature of a member or authorized representative of a member
	ELI PANELL, ESQ., CPA, CFP(r), LL.M.
	Typed or printed name of signee

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Filing Fee: \$25.00

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SECKLIARY OF STATE