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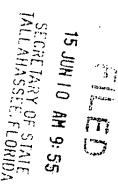
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JUN 1 0 2015 J SHIVERS

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	MONTECITO Name of Limi	GROUP LLC ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	YONA	MUNRO Name of Person	
		Firm/Company	
	8341 D	AMES POINT C	EROSSING BLUD. N
	JACKSON	VILLE, FL 32. City/State and Zip Code	277
÷.	Yowa 2 E-mail address: (2000 @ HOTO to be used for future annual report no	MAIL. COM diffication)
For further information c	oncerning this matter, please ca		
YONA Name o	MUNRO of Person	at (<u>904)</u> 70 Area Code Daytin	4-7064 ne Telephone Number
Enclosed is a check for t	he 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

(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 12/29/2014 and assigned Florida document number L15 000 00 4765 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TANELIN FINANCIAL ADVISORS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) BUILDIANG 200, SUITE 250 TACK SONVILLE, FL 32256 Enter new mailing address, if applicable: PO BY 55/297 (Mailing address MAY BE A POST OFFICE BOX) TACK SONVILLE, FL 32256-1297 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: YONA MUNRO Salve Source Solve
The Articles of Organization for this Limited Liability Company were filed on 12/29/2014 and assigned Florida document number L15 000 00 4765 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TANELIN FINANCIAL ADVISORS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) BUILDIAIG 200, 501TE 250 TACKSONVILLE, FL 32256 Enter new mailing address, if applicable: PO BOX 55/297 (Mailing address MAY BE A POST OFFICE BOX) TACKSONVILLE, FL 32255-1297 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
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A. If amending name, enter the new name of the limited liability company here: TANELIN FINANCIAL ADVISORS LLC
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Enter new principal offices address, if applicable: (Principal office address MUST 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: Name of New Registered Agent YONA MUNRO Agent Street Stree
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Name of New Registered Agent: YONA MUNRO Name of New Registered Agent:
Name of New Registered Agent: YONA MUNRO Name of New Registered Agent:
' C V i
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New Registered Office Address: 8341 DAMES POINT CROSSING BLVD. N. Enter Florida street address
CO Till Indiana
TACKSONVILLE, Florida 32297
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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Ma AMBR = Au	anager ithorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	MUNRO, YONA		Add
	• •	308 SAND AIRE HOUSE KENDAL, UK	D Remove
			Change
MGR	MUNRO, YONA	8341 DAMES POINT CROS JACKSONVILLE, FL 3227	SING BLVD.W. 7_OKOO
		· · · · · · · · · · · · · · · · · · ·	Remove
			Change
MGR	MUNRO, COLIN		Add
		8341 DAMES POINT CRO JACKSON VILLE, FL 3227	
			🗆 Remove
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an effective date	is listed, the date		and cannot be			(optional) 90 days after filing) Rursuant to	
		is block does n ie Department			ory filing requir	ements, this date	: will not be	listed
The 90th da	ay after the	record is file	ed.			it 12:01 a.m.	on the ea	arlier
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	//	Signature (of a member or	authorized repr	sentative of a me	mber		

Page 3 of 3

Filing Fee: \$25.00