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TAULAHASSEE, FLORIDA

JUL 12 2016 S. YOUNG

## **COVER LETTER**

TO: Registration So Division of Co			
	OICE CAPITAL, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ISAAC COHEN		
		Name of Person	
	FIRST CHOICE CAPITAL	L, LLC	
		Firm/Company	
	20900 NE 30TH AVENUE	E, SUITE 210	6 LA
		Address	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	AVENTURA, FL 33180	•	16 JUL 12 PH 2: 07
		City/State and Zip Code	
	KDOCHNEY@IJCHOLDI		9 5
	E-mail address: (	to be used for future annual report notifi	ication)
For further information of	concerning this matter, please ca	all:	
KELLY DOCHNEY		732 305-8600	
Name o	of Person	at ( Area Code Daytime	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)
MAIL	ING ADDRESS:	STREET/COURI	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIRST CHOICE CAPITAL, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 04/27/2016	and assigned
Florida document number L16000082009		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	he abbreviation "L.L.C"
Enter new principal offices address, if applicable:	20900 NE 30TH AVENUE	の 上 ラ 足
(Principal office address MUST BE A STREET ADDRESS)	SUIE 210	<b>=</b> 35
	AVENTURA FL .33180	35. 7.5.
		7
Enter new mailing address, if applicable:	20900 NE 30TH AVENUE	?; '93 2.
Mailing address MAY BE A POST OFFICE BOX)	SUITE 210	<u> </u>
	AVENTURA FL 33180	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her  Name of New Registered Agent:		ter the name of the n
New Registered Office Address:		
	Enter Florida street address	
	, 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 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

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 = Manager

AMBR = Authorized Member Title <u>Name</u> **Address Type of Action** □ Add □ Remove ☐ Change □ Add □ €bange □ Афф □ Remove ☐ Change \_□ Add □ Remove ☐ Change \_□ Add \_□ Remove ☐ Change □ Remove ☐ Change

Effective date, if other than the date of filing:  [Coptional]  [If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 Motes: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  The 90th day after the record is filed.  Signature of a member of a member is supplied to the date of the date		· · ·	
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Filing Fee: \$25.00