117000069219

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	(Address)
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SECRETARY OF BIAIL

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COVER LETTER

TO:	Registration S Division of Co		:
CTID IE		INANCIAL SERVICES, LLC	
SUBJEC	LI;	Name of Limited Liability Company	
The encl	losed Articles of	of Amendment and fee(s) are submitted for filing.	,
Please re	turn all corresp	spondence concerning this matter to the following:	
		YOSSI AMUIAL	
		Name of Person	
		LANE FINANCIAL SERVICES, LLC	
		Firm/Company	
		572 NORTHLAKE BLVD	
		Address	
		NORTH PALM BEACH, FL 33408	
		City/State and Zip Code	•
		YOSSI@NORTHPALMMITSUBISHI.COM	•
		E-mail address: (to be used for future annual report notification)	
For furth	er information	concerning this matter, please call:	
YOSSI A	AMUIAL	305 409-4465 at ()	
	Name	e of Person Area Code Daytime Telephone Number	 , · · · .
Enclosed	l is a check for	r the following amount:	,
\$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Certificate of Status Certified Copy (additional copy is enclosed) Certified Cop (additional copy)	f Status & py

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

LANE FINANCIAL SERVICES, LLC			
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on o Liability Company)	our records.)	• • •
The Articles of Organization for this Limited Liability Company Florida document number L17000069219	were filed on $\frac{03/27/20}{}$	017	and assigned
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 designa	tion "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>		
(Principal office address MUST BE A STREET ADDRESS)			<u>≥</u> o
			7 A Y
Enter new mailing address, if applicable:		<u> </u>) Section 1
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		records, enter th	ne name of the no
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida str	eet address	
		, Florida	<u> </u>
	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

<u>Title</u>	Name	Address	Type of Action
MGR	YOSSI AMUIAL	572 NORTHLAKE BLVD NORTH PALM BEACH FL 33408	
			Add
			Remove
			Change
MGR	AVRHAM AMUIAL	572 NORTHLAKE BLVD NORTH PALM BEACH FL 33408	Add
			Remove
			Change
			□ Add
			□ Remove
			Change
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			Add
			Remove
			Change

Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day. Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12: The 90th day after the record is filed.	MELAHASS
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APRIL 10TH 2017	
Dated 2017	, '
Zurou	· .
Dummel Poramone	·-
Signature of a flember or authorized representative of a member	
BENNY BARMAPOV	

Page 3 of 3

Filing Fee: \$25.00