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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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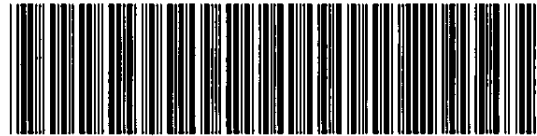
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 APR 16 PM 2:06

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T. CLINE

APR 27 2009

EXAMINER

MO7-6069

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Interstate First Financial Of Jacksonville, 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:

Sharon Owens

(Name of Person)

AmeriLife Group LLC

(Firm/Company)

2536 Countryside Blvd. 6th floor

(Address)

Clearwater, FL 33763

(City/State and Zip Code)

For further information concerning this matter, please call:

Sharon Owens

(Name of Person)

at (727) 726-0726

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: Interstate First Financial of Jacksonville, LLC
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: 11/09/2004

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 02/25/2009
5. New name of the limited liability company: AmeriLife First Financial of Jacksonville, LLC
(must end with "Limited Liability Company," "L.L.C.," "LLC," or "Limited Liability Partnership," "L.L.P.," "LLP," or "Limited Partnership," "L.P.," "LP.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C.," "LLC," or "LLP.")

6. If the amendment changes the period of duration, indicate new period of duration:

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of a member or the authorized representative of a member

Timothy O North

Typed or printed name of signee

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "INTERSTATE FIRST FINANCIAL OF JACKSONVILLE, L.L.C.", CHANGING ITS NAME FROM "INTERSTATE FIRST FINANCIAL OF JACKSONVILLE, L.L.C." TO "AMERILIFE FIRST FINANCIAL OF JACKSONVILLE, L.L.C.", FILED IN THIS OFFICE ON THE TWENTY-SIXTH DAY OF FEBRUARY, A.D. 2009, AT 10:11 O'CLOCK A.M.

FILED
2009 APR 16 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4434057 8100

090354619

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7243023

DATE: 04-14-09

**CERTIFICATE OF AMENDMENT
OF
INTERSTATE FIRST FINANCIAL OF JACKSONVILLE, L.L.C.**

1. The name of the limited liability company is
INTERSTATE FIRST FINANCIAL OF JACKSONVILLE, L.L.C.
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

FIRST: The name of this Limited Liability Company is

AmeriLife First Financial of Jacksonville, L.L.C.

3. The Certificate of Formation of the limited liability company is hereby amended as follows

SECOND. The address of the Company's registered office in the State of Delaware is 3511 Silverside Road, Suite 105, Wilmington, Delaware USA 19810. The name of the registered agent as such address for service of process is *DELAWARE REGISTRY, LTD.*

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment of
INTERSTATE FIRST FINANCIAL OF JACKSONVILLE, L.L.C.
this 25th day of February, 2009.



Authorized Person

R. NATHAN Hightower

Print/Type Name R. Nathan Hightower