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SENTARY OF STREET

COVER LETTER

Division of Corporations	
SUBJECT: ESW Financial Group, LLC. Name of Foreign Limited Liability Company	_
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
William Woolfork Name of Person	
ESW Financial Group, LLC. Firm/Company	
1171 S. Lane Avenue Unit 505 Address	
Jackson ville, FL 32205 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call: William Woolfock at (904) 404-9455 Name of Person Area Code & Daytime Telephone Number	<u>-</u> er
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount: \$\sqrt{\$25}\$ Filing Fee \$\sqrt{\$55}\$ Filing Fee & \$\sqrt{\$60}\$ Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy	atus &

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: ESW Financia brup, LLC
2. Jurisdiction of its organization: Texas
3. Date authorized to do business in Florida:
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?
5. New name of the limited liability company:(must end with "Limited Liability Company," "L.L.C.," or "LLC.")
(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." or "LLC.")
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: Original application stated that the nature of the business 18 Insulance " The actual material of the business is Investment Services.
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 of the authorized representative of a member
Typed or printed name of signee
Filing Fee: \$25.00