## M12000002634

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ad                     | ldress)            |             |
| (Ad                     | ldress)            |             |
| (Cit                    | ty/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | ısiness Entity Nan | ne)         |
| (Do                     | ocument Number)    |             |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
| •                       |                    |             |
|                         |                    |             |
|                         |                    |             |

Office Use Only

G. MCLEOD
JUL 23 2012
EXAMINER



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LUNE FARY OF STATE
AND ASSET FOR ORION

## **COVER LETTER**

| TO: Registration Section Division of Corporations   |         |
|---|---------|
| SUBJECT: Manhattan Financial Advisors, LLC  | _       |
| Name of Foreign Limited Liability Company   |         |
| Dear Sir or Madam:  |         |
| The enclosed Affidavit by Foreign Limited Liability Company to Change Manage Managing Member(s) and fee(s) are submitted for filing.                                | r(s) or |
| Please return all correspondence concerning this matter to the following:   |         |
| Hanna Karcho  |         |
| Name of Person  |         |
| Manhattan Financial Advisors, LLC   |         |
| Firm/Company  |         |
| SS E. Long Loke Bond, #204  |         |
| 55 E. Long Lake Road, #204  Address   |         |
| Address   |         |
| Troy, MI 48085  |         |
| City/State and Zip Code   |         |
| hkarcho@yahoo.com   |         |
| E-mail address: (to be used for future annual report notification)  |         |
| For further information concerning this matter, please call:  |         |
| Anna Sigurdson at ( 248 ) 645-5400  |         |
| Name of Person Area Code and Daytime Telephone Nur  | nber    |
| STREET/COURIER ADDRESS: MAILING ADDRESS:  |         |
| Registration Section Registration Section   |         |
| Division of Corporations Division of Corporations   |         |
| Clifton Building P.O. Box 6327  |         |
| 2661 Executive Center Circle Tallahassee, Florida 32314   |         |
| Tallahassee, Florida 32301  |         |
| Enclosed is a check for the following amount:   |         |
| \$25 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} |         |

## AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

| 1. The name of the limited liability compartment of State is: Manh                     | ny as it appears on the records of the Florida eattan Financial Advisors, LLC |          |
|--|---|----------|
| 2. This entity was formed under the laws o   | of:   |          |
| 3. This entity was authorized to transact buand its Florida document/registration numb |   |          |
| 4. The name and address of each manager  | or managing member is as follows:   |          |
| <u>Title:</u><br>"MGR" = Manager<br>"MGRM" = Managing Member                           | Name and Address:   |          |
| MGRM   | Hanna Karcho<br>55 E. Long Lake Road, #204<br>Troy, MI 48085                  |          |
|  |   |          |
|  | A CREATE AS   | 12 JUL 2 |
|  |   |          |
| Required Signature:  Signature of Manager.   | Managing Member or Member   |          |

Filing Fee: \$25